

A Letter to My Child's Counselor

(To be completed by parent or guardian and turned in at check in - DO NOT MAIL THIS FORM)
Only your child's counselors and the camp director will have access to this form

Camper Name _____ Nick Name _____

Use reverse if additional space is needed for any answers - If questions do not apply to your child you may leave blank

This is my child's _____ year at Y Camp: Horsethief Reservoir

I want them to attend camp because _____

While at camp I hope they will _____

One skill area I want to be sure they have training in is _____

My child is a: Strong Swimmer Fair Swimmer Not yet a swimmer

My child is most happy when _____

My child is most unhappy when _____

My child is enthusiastic about _____

My child is not fond of _____

My child might be afraid of _____

My child's peer interactions are _____

My child has been diagnosed as having some special needs such as learning disabilities, emotional or behavioral problems ___ No ___ Yes, you can best support them by _____

My child will be taking medications at camp ___ No ___ Yes

My child has the following dietary needs _____

If my child were to become homesick, I would suggest _____

A significant event in my child's life recently that you need to be aware of is (i.e. loss of a loved one, illness, change in living situation) _____

Any further comments, hopes, suggestions or concerns _____

Please contact the summer camp director if you have additional or confidential information to share.