

The Hollows Camp Personal Profile for Day Campers

This form must be returned before your child arrives at camp.

CAMPER'S NAME.....

We want to provide a happy, educational and safe summer camp experience for your child. In order to accomplish this it is necessary to have information about his or her habits, likes and dislikes. Would you please give the following questions your careful attention, and thereby assist us in helping your child and you.

Indicate with (x) after each of the following that best describes your child:

Prefers passive activities..... Athletically inclined..... Enjoys competitive sports..... Shy with peers..... Shy with adults..... Makes friends easily..... Difficulty keeping friends..... Emotional..... Sensitive..... Easy going..... Nervous..... Temperamental..... Happy..... Aggressive..... Tires easily..... Other.....

1. SWIMMING: Does your child want to take swimming instruction at camp? Yes..... No.....

Most recent swim level completed: Non-swimmer.....

2. RIDING: Does your child want to ride? Yes..... No.....

1. Beginner: (never ridden before).....

2. Some experience: Describe

3. CANOE, KAYAK, ARCHERY, TENNIS, ARTS & CRAFTS, DRAMA, TRAMPOLINE, PAINTBALL

Activities which most appeal to your child

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Are there any activities in which you would like your child encouraged?

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Is your child eager to go to camp or is he/she being urged?

Name of person who may pick up my child other than parents.....

Previous camps attended?

I became interested in The Hollows Camp through.....

I understand this information is confidential and agree that it may be stored under secure conditions with the camp records. I agree that this information may be shared with my child's counsellor on an "as needs" basis.

Parent's signature