

CAMP EAGLE HILL 2011 CAMPER INFORMATION FORM
(This form must be returned to the camp office for each camper attending camp)

**PLEASE
ATTACH A
RECENT
PHOTO OF
YOUR CHILD**

Camper's Name _____

Session at Camp: (circle one)

Nickname _____

Full Summer July August

Home City and State _____

Camper's Birthdate ____/____/____

Age as of Opening of Camp _____

Grade Completing _____

Any Siblings at Camp? (circle one) yes no

If yes, please give us names and grade just completed:

a. Name _____ Grade Completing _____ **b.** Name _____ Grade Completing _____

Coming with any friends to camp? (circle one)

If yes, please give us names and grade just completed:

a. Name _____ Grade Completing _____ **b.** Name _____ Grade Completing _____

1. Has your child been to overnight camp before? (circle one) yes no

If yes, Name of Camp _____ Year _____

Name of Camp _____ Year _____

2. How likely is homesickness for your child? (circle one) *very unlikely unlikely possibly likely very likely*

3. How easily does your child make friends? (circle one) *very easily easily some difficulty great difficulty*

4. Are there any family circumstances that might affect your child's summer at camp? (ie: divorce, moving homes, illnesses, etc.)

5. Is your child afraid of darkness, animals, lightening, thunder, or anything else?

6. Do you have any specific suggestions concerning your child's bunk placements? (ie: different grade level, type of kids, etc.)

7. What does your child like to do with his or her spare time? _____

8. How important is athletic competition to your child? (circle one) *very important important some is o.k. happier without it*

9. How important is having a part in the show to your child? (circle one) *very important important not important*

10. Please name the top three-four activities where you as a parent feel you would like to have your child participate more heavily with extra instruction or encouragement: *(list a-d from most important activity to fourth most important activity)*

a. (most important activity) _____ b. (second most important activity) _____

c. (third most important activity) _____ d. (fourth most important activity) _____

11. Does your child have any eating habits that we should be aware of? Are there any foods to be avoided?

12. Please provide us with any important information here *(regular medications used, special conditions, restrictions, etc.) PLEASE MAKE SURE THIS INFORMATION IS ON YOUR CHILD'S MEDICAL FORM AS WELL.*

13. WOULD YOU LIKE ANY SPECIAL COMMUNICATIONS WITH HOME BY OUR MEDICAL STAFF CONCERNING THIS CHILD'S HEALTH?

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FOR NEW CAMPERS ONLY:

Please put the numbers 1, 2, or 3 (1 for the most important factor, 2 for the next most important factor and 3 for the third most important factor) next to the three factors that helped you to choose Camp Eagle Hill for your family for the upcoming camp season:

____ Location ____ Camp Atmosphere ____ Staff ____ Facilities
____ Range of Activities ____ Program (structure/choice) ____ Promotional Materials
____ Friend's Referral ____ Camp Referral Agent ____ In-Home Director's Visit
____ Camp Tour

Other Factor (please describe) _____

FOR RETURNING CAMPERS ONLY:

It is important that your child live with the group of campers that he or she will be happiest with. To help us in this process, please complete the form below: (NOTE: please do not give us negative requests regarding children that your child does not want to live with – Thanks!)

CHECK ONE:

____ Since I do not have a strong preference, please place my child where the camp feels that he/she will be happiest.

____ I want my child to be with a different group of campers than last summer.

____ It is very important that my child be with all or some of the following campers (please list other campers' names in order of importance to your child with "1" being the most important) Please appreciate the difficulty of creating groups based on the many different interests of a number of children hoping to be grouped together. We prefer to keep our groups somewhat smaller in size. With this in mind, we will attempt as best we can, to honor as many of your family's choices for bunkmates for your child listed here.

1. _____
2. _____
3. _____
4. _____
5. _____

CAMPER'S NAME _____

PARENT'S SIGNATURE _____