



# 2008 NEW CAMPER INFORMATION FORM

**Please Check:**

**UNIT:**

- Chalutzim (Entering Grades 3/4/5/6)
- Chaverim (Entering Grades 7/8)

- Bogrim (Entering Grades 9/10)
- CIT (Entering Grade 11)

**SESSION:**

- July
- Mini Camp A
- Mini Camp B
- August
- Mini Camp C
- Mini Camp D
- Full Season
- Gesher

**#YEARS AT LAKELAND (including this summer):** \_\_\_\_\_

**Please Print:**

CAMPER'S NAME \_\_\_\_\_ SEX:  M  F  
(Last) (First)

CAMPER'S EMAIL: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ Age on July 1. Years \_\_\_\_\_ Months \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ WORK PHONE \_\_\_\_\_  
CELL PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

MARITAL STATUS OF PARENTS: \_\_\_\_\_

SINGLE PARENT FAMILIES: CUSTODIAL PARENTS:  Joint  Mother  Father  Other

OTHER CHILDREN AND AGES: \_\_\_\_\_

OTHERS IN HOME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

1. Has your child attended any camp before?  Yes  No  
If yes, name(s) of camp(s) \_\_\_\_\_  
How did your child enjoy activities, counselor, etc.? \_\_\_\_\_

2. What did (does) your child most enjoy? Least enjoy? (Interests, hobbies, etc.) \_\_\_\_\_

3. How would you describe your child? (Friendly, shy, leader, follower, active, passive, cooperative, responsible, etc.?) \_\_\_\_\_

How does your child feel about going to camp? \_\_\_\_\_

6. Does your child have any special needs such as health concerns, fears, speech problems, difficulties in adjusting to new group situation, physical problems, behavioral challenges, etc.? \_\_\_\_\_

7. Do you feel that your child may need one-to-one assistance in a particular area?  Yes  No  
Please describe: \_\_\_\_\_  
\_\_\_\_\_
8. Is your child or the family receiving any special help around emotional concerns or behavior at school or home? (Psychiatrist, Therapist, Jewish Family Service, etc.) \_\_\_\_\_  
\_\_\_\_\_
9. Have there been any changes in the family situation in the past year? (Death, separation, divorce, family move, new school, birth, etc.?) \_\_\_\_\_  
\_\_\_\_\_
10. What is your child's relationship with siblings? With you? Are there differences in attitude, relationship towards either parent? \_\_\_\_\_  
\_\_\_\_\_
11. What would you like to see your child obtain from the camp experience? \_\_\_\_\_  
\_\_\_\_\_
12. What does your child want to get from the camp experience in terms of skills/interests, etc.? \_\_\_\_\_  
\_\_\_\_\_
13. Is there any additional information about your child that you feel might be helpful to us in providing a meaningful experience this summer? \_\_\_\_\_  
\_\_\_\_\_
14. If camper has time on his/her hands, how does he/she occupy this time?  
\_\_\_\_\_
15. If the camper starts something enthusiastically and hits a snag, how does he/she handle it? Does he/she seek help? Get frustrated? Walk away? \_\_\_\_\_  
\_\_\_\_\_
16. Swimming Ability: \_\_\_\_\_
17. Is there a particular camper with whom your child would like to be grouped? **We cannot guarantee this placement, but will attempt to accommodate your request.**
- NOTE: Children are grouped together according to age, grade, and session**  
1<sup>st</sup> Choice: \_\_\_\_\_  
2<sup>nd</sup> Choice: \_\_\_\_\_
18. **I would like to discuss additional information with the Camp Director prior to camp.**  
\_\_\_\_\_ Yes \_\_\_\_\_ No

Signed: \_\_\_\_\_  
Parent's signature

Date: \_\_\_\_\_