

# CAMP LUTHER

## CAMPER INFORMATION FORM

**To be filled out by Parent or Guardian with input from your child**

Welcome to Camp Luther! You have sent in your child's registration form and down payment securing your child's place at Camp Luther this summer. Please write the date on your calendar so you can prepare for the week. In addition to filling out this form and the medical form, please help prepare your child for camp by talking with them. Discuss what they can expect in a week at Camp Luther, what kind of behavior you expect them to display, and how much fun they will have. Discuss the "What to Bring" form with your child. This will help your child be mentally prepared for the week.

Please help us be prepared for your child's week at camp by completing this form. The information requested will help the assigned counselor become better acquainted with your child prior to arrival. This enables us to be more informed and effective in our care of your child and his or her transition time spent away from home.

**Please complete this form and provide us with any additional information you consider helpful.** Be assured that this information will be held in strict confidence among our staff. The information you provide will enhance your child's experience at Camp Luther. We encourage you to keep your child and our staff in your prayers! It is our prayer that each child at Camp Luther has a positive experience and grows in their faith development, social skills and appreciation for God's creations during their week here.

**Return this form via USPS mail by June 1st Do not fax any forms!**

*If you register for camp after this date, complete and return immediately.*

### GENERAL INFORMATION

Camper's name \_\_\_\_\_ Nickname \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Grade in School \_\_\_\_\_ Date of Birth \_\_\_\_\_

Camper lives with:  Both Parents  Just Mom  Just Dad  Other

*(This information helps us relate to the camper and understand their daily life.)*

### INTERESTS AND HOBBIES

Camper's hobbies: \_\_\_\_\_

Camp activities camper is especially looking forward to: \_\_\_\_\_

Activities camper is apprehensive about: \_\_\_\_\_

Behavior at school is:  Excellent  Good  Fair  Poor

Camper's attitude toward school: \_\_\_\_\_

For office use only:

Camper Name \_\_\_\_\_

Block Code \_\_\_\_\_

**PHYSICAL HEALTH** (These should be listed in detail on the medical form.)

Describe any special needs we can accommodate: (If your child has any kind of physical, emotional, cognitive or behavioral special needs you **must contact** the Youth Camp Program Director ASAP to discuss how we can accommodate those needs.) \_\_\_\_\_  
\_\_\_\_\_

Is camper troubled with bed wetting? \_\_\_\_\_

Specific food or environmental allergies: (all food allergies must be separately reported to the Program Director ASAP) \_\_\_\_\_  
\_\_\_\_\_

Severity of allergic reaction:     Mild                     Medium                     Severe                     Deadly

Any recent injuries that might impede camp activities? \_\_\_\_\_

What time does camper typically go to bed and wake up? \_\_\_\_\_

**SOCIAL SKILLS AND EMOTIONAL HEALTH**

Describe camper's reading ability/favorite books: \_\_\_\_\_

Number of Brothers: \_\_\_\_\_ Ages: \_\_\_\_\_

Number of Sisters: \_\_\_\_\_ Ages: \_\_\_\_\_

Camper's attitude toward camp experience:     Enthusiastic     Interested     Lukewarm     Unenthused

Prior camp experience: *yes no* significant notes \_\_\_\_\_

Do you think camper might become homesick? *yes no* Explain: \_\_\_\_\_

What care do you recommend for homesickness? \_\_\_\_\_

\_\_\_\_\_ (Calling home is a last resort)

Camper's temperament is usually: (check all that apply)

- Timid                     Outgoing                     Aggressive                     Sensitive                     Nervous
- Happy                     Moody                     High Strung                     Laid Back

Camper's fears and weaknesses: \_\_\_\_\_

Does your camper know how to swim?  Y or  N Is Camper afraid of the water? \_\_\_\_\_

Describe how camper gets along with children: \_\_\_\_\_

In what way do you think the Camp Luther experience will best help your child? \_\_\_\_\_  
\_\_\_\_\_

Have there been any significant life changes within the last year that may be affecting your child emotionally and/or behaviorally? If so, would you be willing to identify them for us? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPIRITUAL DEVELOPMENT**

Home church and denomination: \_\_\_\_\_

Has camper been baptized? \_\_\_\_\_ Confirmed? \_\_\_\_\_ Attend Sunday school? \_\_\_\_\_

Is camper enrolled in a Parochial School? \_\_\_\_\_

Does camper feel comfortable talking about their faith? \_\_\_\_\_

How important is faith in the camper's life? \_\_\_\_\_

How can our summer staff assist or encourage your child to achieve his or her life goals on a more personal level? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_