Carson-Simpson Farm – Camper Profile 2010

Dear Parent,
Please complete this profile, regardless of whether your child is new to Carson-Simpson Farm, or a returning camper. Our counseling staff would like to get to know your child better prior to his/her arrival to camp. The information you provide will be treated with the utmost discretion. Thank you, in advance, for your attention to this form.

Camper's Last Name _____ First Name _____

Camper Info

Are there Emotional or Physical Limitations or Fears about which we should be aware? Yes __ No __

If Yes, please specify:_____
Is your child under the care of a psychologist/psychiatrist/therapist? Yes __ No __ If Yes, explain nature:

_____
Are there outside intervention agencies involved (in school or home care) in your child's development? Yes __ No __

If Yes, please specify: _____

_____

Family Info

List family members with whom the child lives primarily, or if shared residences, specify schedule:

_____
Are there any changes or conditions that might impact your child's well-being, such as illness of a family member, parents expecting a new baby, parent's separation or divorce, or move to a new home or school, etc? _____

_____
Are there any visitation restrictions of which the camp must be aware? Yes __ No __ If Yes, please specify:

_____
If such a restriction exists, a copy of the current court order must be on file at camp. Every camper, regardless of family issues or disputes, must be safeguarded when in our care. Without legal documentation, we cannot enforce any instructions with regard to parental custody/visitation.

Camp Programs

Share any comments or concerns about your child's participation in the following activities:

Swimming _____

Please describe how we can best provide a positive day camp experience for your child: _____

_____

_____

Parent Signature _____ Date _____