



All Overnight Campers: Camper Confidential

For:

What name does your camper prefer to be called?

Will your camper celebrate a birthday while at camp?

Yes

No

THUNDERBIRD: What year will this be for your camper at Camp Thunderbird?

HARRISON: What year will this be for your camper at Camp Harrison?

What is your child's t-shirt size?

How does your camper feel about attending camp?

Does your camper have any known disabilities, fears, behaviors or major life changes that may be helpful for the counselors to be aware of? (Counselors are not provided with Camper Health Profiles)

Please provide any additional details you feel may help our counselors support your child in having a great experience at camp. (For example: does your child have any comfort or support items that might help them feel more at ease adjusting to camp?)

Are there any activities or aspects of camp that your camper is particularly looking forward to? What are their goals for their time at camp this summer?

Who will be picking up your camper on closing day? Please list full names.

Signature _____

Date _____