

# CAMPER PROFILE FORM 2021

(To be filled out by parents)



**Please return by May 1st**

23970 N. Elm Road, Lincolnshire, IL 60069  
phone (847) 634-3168 fax (847) 634-8262

All information is confidential between our directors, head staff, nurse and your child's counselor. The more we know about your child, the more we are able to help them with a successful camp experience. Please repeat any information you may have given the office verbally. *Feel free to contact us or send a separate note if there is information that you do not want made available to staff above.*

Camper's full name: \_\_\_\_\_ Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Nickname/name camper prefers: \_\_\_\_\_ Grade next fall: \_\_\_\_\_

Name of school: \_\_\_\_\_ Hometown: \_\_\_\_\_

Parent name(s): \_\_\_\_\_  Married  Divorced  Separated

Has your child been to camp before?  Yes  No If yes, where: \_\_\_\_\_ #of years: \_\_\_\_\_

What do you hope your child gains from their camp experience? \_\_\_\_\_

How does your child feel about spending the summer at Tamarak? \_\_\_\_\_

What is your child most looking forward to at camp? \_\_\_\_\_

Any concerns your child may have with starting camp? \_\_\_\_\_

Does your camper make friends easily/do you have any social concerns? \_\_\_\_\_

What expectations do you have for your child's counselor? \_\_\_\_\_

Does your child have any health concerns we should be aware of?  Yes  No

If yes, please describe: \_\_\_\_\_

Does your child have any physical, emotional or behavioral considerations?  Yes  No

If yes, please describe: \_\_\_\_\_

Does your child receive outside therapy for any special needs? (OT, speech, behavioral, etc.)  Yes  No

If yes, please describe: \_\_\_\_\_

Will your child continue to receive these services during the summer?  Yes  No

Does your child have any fears?  Yes  No If yes, what are they and how do you handle them at

home? \_\_\_\_\_

Has your child or family dealt with significant issues in the past year that you would like us to be aware of?

Tell us about your child's school experience this past year: \_\_\_\_\_

Please list any additional information that you feel will help us provide a positive camp experience.