



# Information for the Dean

Camper's Name \_\_\_\_\_ Event # \_\_\_\_\_

**Parent's** Complete online ([jville.wufoo.com/forms/deans-information-form](http://jville.wufoo.com/forms/deans-information-form)) or mail with your Health Form 2 weeks before your event.

We ask you to complete this box with information that will help make your camper's experience at camp a positive one.

Examples: Bed-wetting, homesickness, fears, any recent trauma, physical restrictions

Your signature indicates that you understand that this information will be shared with dean and counselors when it is in the best interests of your camper. It is important for families to realize that we will do every thing possible to help every camper have a wonderful time at camp. The camps are Safe Sanctuary compliant. The health and safety of each camper is our greatest concern. If there is a serious problem with your camper, you will be called. We have a zero tolerance for any abuse or violence.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Camper** The information on this form will help your dean and counselors know you better and help you have a great time at camp. It will only be shared with your counselors, so please be open and completely honest.

1. Name (nickname) you want to go by at camp \_\_\_\_\_
2. How many times have you gone to camp? (Check one) \_\_\_\_\_ first time \_\_\_\_\_ two or more \_\_\_\_\_ too many to count
3. What things are you hoping will happen this week? \_\_\_\_\_  
\_\_\_\_\_
4. What are you hoping will not happen this week? \_\_\_\_\_  
\_\_\_\_\_
5. What are your favorite camp activities? \_\_\_\_\_
6. What makes you happy? \_\_\_\_\_
7. What makes you sad? \_\_\_\_\_
8. What makes you nervous or anxious? \_\_\_\_\_
9. Is there anything else you want us to know about you that will help us make this a great week ?  
\_\_\_\_\_

I understand that I can talk about my concerns or problems with my counselor or dean who will respectfully listen.

Camper's Signature \_\_\_\_\_