



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA CAMP LAKEWOOD
13528 State Highway AA, Potosi, MO 63664
Phone: 573-438-2155
Fax: 573-438-3913
www.camplakewood.org

PARENTS' CONFIDENTIAL INFORMATION 2021

YMCA CAMP LAKEWOOD

Camper's Name: _____ Session: _____
Last First

Forms must be sent in at least 3 weeks prior to the camper's arrival at camp. *

In order to be most helpful to your child in his/her adjustment to camp life, to sympathetically understand him/her, and to direct his/her growth and development, we are asking for the following confidential information.

This information is shared only with relevant staff, and will be used intelligently so that he/she can get the most from their camping experience. Your child will not see this form at camp. Have your camper fill out the camper letter first, before you fill out the informational section of this form.

Camper's Age: _____ Any Brothers?: _____ Ages: _____ Any Sisters?: _____ Ages: _____

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Personality Traits: Please mark the following characteristics that best describe your camper.

<input type="checkbox"/> Tense	<input type="checkbox"/> Happy	<input type="checkbox"/> Easy Going	<input type="checkbox"/> Nervous	<input type="checkbox"/> Aggressive
<input type="checkbox"/> Shy	<input type="checkbox"/> Selfish	<input type="checkbox"/> Follower	<input type="checkbox"/> Moody	<input type="checkbox"/> Antagonistic
<input type="checkbox"/> Helpful	<input type="checkbox"/> Leader	<input type="checkbox"/> Cooperative	<input type="checkbox"/> Quick Learner	<input type="checkbox"/> Withdrawn

Needs extra time for _____

Makes friends: Easily Fairly Easily With Difficulty Comments _____
(Mark One)

Expresses feelings: Easily Fairly Easily With Difficulty Comments _____
(Mark One)

What serious fear does your camper have? _____

What play activities does he/she most enjoy? _____

How does he/she get along with children his/her age? _____

Has your child been away from home before? _____ How Long? _____

This is your child's _____ year at Camp Lakewood. The year my child last attended camp _____

How was his/her experience? _____

What do you hope your child will gain from his/her experience at our Camp? _____

Which activities or special skills would you like to see your child learn, practice, or develop while at Camp? _____

What does the camper hope to get or learn from Camp? _____

How does your child feel about coming to Camp Lakewood? _____

Special note regarding camper's health (*eating problems, allergies, previous illnesses, bed-wetting, fears or activities they cannot participate in, etc.*) _____

Please provide any other information, suggestions, or ideas that will help your child's counselor in fulfilling his/her duties and make your child's camping experience a more enjoyable one. _____

CAMPER LETTER

Each camper is asked to write a note to his or her counselor before camp begins. In this way, our staff can make the campers feel welcome and know more about each child in his or her cabin group. Campers should be encouraged to complete this letter with some specific things they would like to do at camp this year, and camping experiences they hope to gain this summer.

Please include some of your hobbies, any nicknames, previous camping experiences or special interests you have.

Date: _____

Dear Counselor:

By Camper: _____

(Name/Signature)

RETURN FORM TO:

By Mail
YMCA Camp Lakewood
13528 State Highway AA
Potosi, MO 63664

By Fax
573-438-3913

By E-Mail
camplakewood@gwrymca.org

For questions please call 573-438-2155

Note: Your child may not be allowed into camp without all releases being signed and forms returned to the camp office.