

**ELBOW LANE DAY CAMP**  
**828 Elbow Lane, Warrington, PA 18976**

**2011 CAMPER DATA SHEET**

Please complete and return this form by May 15th. Information will be shared with group counselors, unless otherwise specified. All details will be carefully studied and requests will be conscientiously carried out if this form is received by the due date. Therefore, it is essential that you include all information in order to assure your child has a happy, healthy and productive summer. Your wholehearted cooperation will enable the camp staff to use this information toward the intelligent guiding of your child from the first day of camp.

Camper's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

School Attending \_\_\_\_\_ Grade in Sept. 2011 \_\_\_\_\_

Is your child outgoing? \_\_\_\_\_ Reserved? \_\_\_\_\_

Do you anticipate any adjustment problems? If so, describe \_\_\_\_\_

\_\_\_\_\_

Is there any health conditions/allergies of which the counselor should be aware? \_\_\_\_\_

If so, describe \_\_\_\_\_

What physical symptoms does your child display before the onset of illness of which the counselor should be aware? \_\_\_\_\_

Special programs or activities camper is involved in:

\_\_\_\_\_ Gifted      \_\_\_\_\_ Support      \_\_\_\_\_ Band/Music      \_\_\_\_\_ Drama

\_\_\_\_\_ Athletics (specify) \_\_\_\_\_ Other (specify) \_\_\_\_\_

Does your child exhibit concerns over any of the following: \_\_\_ pools/swimming; \_\_\_ thunder; \_\_\_ heights; \_\_\_ clowns; \_\_\_ other (describe): \_\_\_\_\_

Previous camp experience \_\_\_\_\_ Number of years at Elbow Lane \_\_\_\_\_

Is the camper enthusiastic about coming to Elbow Lane? \_\_\_\_\_

Special requests, if any (other than group placement -- "bunks" are now set) \_\_\_\_\_

\_\_\_\_\_

**Minors (preschool age) only** - Does camper require a nap?    Yes    No

*Use the back of the form to list any other factors that will lead to a more complete understanding of your child.*