

Complete and Return by April 30, 2009

Camp Manito-wish YMCA

P.O. Box 246

Boulder Junction, WI 54512

Fax: (715) 385-2461

Outpost Camper History

To be completed by parents or guardians

PLEASE MARK APPROPRIATE TRIP:

Voyageur: Session date: _____ Trip: _____

Pioneer I II III Isle Royale I II III

Georgian Bay I II III Western Backpacking ____

Saskatchewan "Canuck" Canoeing ____

Expo Backpacking ____ Expo Canoeing ____

The information on this Camper History Sheet is used by administrative staff to assist them in properly placing your camper in a group that will offer him/her the best environment for individual and interpersonal growth. It also helps our counseling staff understand how to offer the best type of experience for your camper. Giving full and accurate information will better enable us to understand and guide your camper. Although your camper may be returning for another year of camping with us, and you may have previously completed this form, ***please take the time to complete the sheet this year.*** The updated information is helpful in understanding the matured goals and personality of your camper.

Camper's Name _____ Nickname _____

City _____ State _____

School _____ Date of birth _____ **Grade in Fall '09** _____

Is camper returning to Manito-wish? Yes ___ No ___ If yes, cabin or trip in '08 _____

Height _____ Weight _____ Age of brothers _____ Age of sisters _____

Father's Name _____

Occupation _____

Mother's Name _____

Occupation _____

If either parent is deceased, state which one _____

Are parents divorced or separated? _____ If so, with whom does camper live? _____

To whom should parent communication be addressed? _____

What is your hometown newspaper? _____

*This information will be helpful for your camper's trip leader and the camp administration when working with your child this summer. We realize some of the following questions are direct and that they may not apply to your camper. This information is important to disclose to best meet the needs of your child. Thank you for your honesty.
Please attach additional sheets of paper if necessary.*

ILLNESS, ACCIDENTS OR OPERATIONS: Has camper had any serious illness or accidents?

Please give details on camper's health that the trip leader should know, including any allergies or dietary restrictions. _____

Tell us about your family. Has your family situation recently changed? _____

Describe your camper's relationship with peers. What role does your camper assume?

What advice can you offer our staff in working with your camper?

Briefly describe the method(s) you utilize in disciplining your camper. _____

How does your camper feel about attending Manito-wish this summer?

_____ Does your camper require any special accommodations?
Physical? Behavioral? _____

How would you describe your child's behavior at school? _____

Has your child been diagnosed with or received any treatment or counseling for the following:

<u>Yes</u>	<u>No</u>		Please elaborate on any YES responses:
___	___	Attention Deficit Disorder (ADD)	_____
___	___	ADHD	_____
___	___	Depression	_____
___	___	Drugs / Alcohol / Tobacco abuse	_____
___	___	Eating disorders	_____
___	___	Physically aggressive behavior	_____
___	___	Other _____	_____