

Mount Tom Day Camp

Camper Profile

[For Office Use Only – Group: _____]

*Thank you for enrolling your child at Mount Tom Day Camp. Our camp activities are designed to help campers learn, grow and have fun within a group structure. To ensure that your child gets the most of his/her experience, we request that you complete this **Camper Profile** and return it to us by **May 15th**. The more we know about your child's interests, friends, siblings, school experiences, fears, etc., the better our staff can understand and address his/her needs.*

Name: _____
LAST FIRST NICKNAME

Gender: M / F Home Phone: _____ Cell Phone: _____

Camper's Favorite Activities (circle): SWIMMING ARTS/CRAFTS TENNIS SOCCER DANCE

DRAMA/THEATRE SOFTBALL/BASEBALL VOLLEYBALL BASKETBALL ORIGAMI MUSIC

NATURE/SCIENCE CHALLENGE COURSE ARCHERY GAGA OTHER: _____

Describe camper's previous camp experience (where, when, was it successful?):

(For campers age 3-6) When does your child rest/nap?: _____

The following section will be used by our Waterfront staff to help assess your child's swim level; they will not have access to other responses on this form which will be kept confidential and utilized by our counseling staff only.

SWIMMING LEVEL

CHECK ONE: Returning Mount Tom Camper New Camper

Describe Current Swim Level (if known, please include Red Cross Swim Level):

Describe any swim instruction during the school year:

*****PLEASE ATTACH ADDITIONAL PAGES TO EXTEND YOUR RESPONSES IF NECESSARY.*****

Is your child comfortable with his/her physical abilities? (This may include other than athletic activity; concerns about weight/size/height can be included here):

How does your child make and keep friends?

Very well Fairly well With difficulty Please describe :

Describe any behavioral concerns regarding the camper (i.e. at home, school, after school programs, another camp):

How does your child make transitions from one activity to another?

Very well Fairly well With difficulty Please describe :

Describe any situation which may negatively affect camper's behavior (i.e. fears, lack of choice, wait time, sharing, competition, denial of wishes, being new to an environment/situation):

Describe any learning disabilities or challenges (ie. processing verbal/auditory instructions, expressive and/or receptive language difficulty, sensory integration):

THANK YOU FOR YOUR CANDOR WHICH WILL HELP US MAKE THIS SUMMER YOUR CHILD'S BEST!