

KINDERLAND CAMPER UPDATE

The purpose of this update is to help us provide the best summer experience for your child.

While we already know your child from previous summers at Camp Kinderland,
circumstances often change between camp seasons, and it helps us to be aware of them.

PLEASE BE CANDID. We will use the utmost discretion in sharing sensitive information with appropriate staff members, and at no time will other children have access to any information included herein. All children have some problems and special needs—social, physical, medical, etc. — just as all children have strengths, skills, and special talents.

Please share the good, and the not-so-good, and help us know our camper—your child.

Camper's Name _____

Home Address _____

Age _____ Date of Birth _____ Current School Grade _____

Name parent 1 _____

Address _____

Phone _____ e-mail _____

Occupation _____

Name parent 2 _____

Address _____

Phone _____ e-mail _____

Occupation _____

Siblings: Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Medical

Does your child have any recent medical condition or history of which we should be aware?(also attach separate sheet to medical form.) Please describe disabilities, physical limitations, allergies, etc.

Does your child take any medication on a regular basis? Explain.

Name, address and phone of child's physician:

Dental: Does your child have a dental condition of which we should be aware? e.g, dental appliance with special instructions, condition relevant to dental treatment such as extreme fear or sensitivity, or allergy to anesthetic.

Name and phone of dentist: _____

Name and phone of orthodontist if applicable: _____

Physical

Are there any physical problems, habits, tendencies, of which we should be aware? Please pay particular attention to bedwetting, bladder and bowel control, eating habits, sleeping problems, learning disorders. Has your daughter begun menstruating, or has your child's body started to change in ways that make him/her feel awkward? Share with us any strategies you've devised at home to handle these situations; make any recommendation you feel would be helpful.

Please describe any changes in family circumstances that may have bearing on your child's camp experience. These might include recent separation or divorce or remarriage, illness or death of close family member, birth of sibling move to new home, etc. Please share with us your child's reaction to this circumstance, and any suggestions that would help us meet your child's needs regarding it.

Emotional/Behavioral

Camp life is intimate and though children tend to be on their "best behavior" for the first few days, they soon start feeling comfortable and behave more openly. Please review the following camp situations and note if you expect any particular responses from your child that we might watch for:

Homesickness:

Fears? Nightmares?

Newly developed problems or negative tendencies in your child's social behavior with peers (aggression, shyness, sensitivity.) Teases or tries to dominate, or victim of teasing or exclusion? Temper? Physical or verbal aggression in a conflict situation?

Tell us about positive qualities and tendencies you have noted in your child's social behavior. These might include compassion, friendliness, generosity, cooperation, respect for differences, etc.

Are there any aspects of him/herself about which your child has recently become more sensitive? These might include physical characteristics such as height or weight, learning disabilities, family situations, etc. Please help us be extra sensitive by sharing this information.
