

***Please attach a photo here***

Jameson Ranch Camp  
Glennville, Ca 93226  
661-536-8888 fax 661-536-8896

## Dear Parents:

To better acquaint us with your child so that we may serve him/her with quality, we are asking you to fill out this form and **send it back to us within a couple of weeks from the time you get it.**

**Please attach a picture of your child on the upper right of this form.** A self-addressed envelope is enclosed for your convenience.

NAME OF CAMPER \_\_\_\_\_ DATE \_\_\_\_\_ AGE \_\_\_\_\_

1. Has your child attended camp before?      Where?
2. What is his/her general response to camp?
3. Has your child ever been homesick when away from you? How did you handle it?
4. Does he/she have any anxieties or fears about being away from home? About being at camp?
5. How does your child like school?
6. What extra curricular activities does he/she participate in?

(over)

7. Is he/she in any special programs at school? Please explain.
8. Does he/she have A.D.D. or A.D.H.D.? Is medical treatment being used?
9. How many brothers and sisters does he/she have, and what age?
10. To whom does your child relate best (family, friends, animals, etc)?
11. To whom does your child relate least?
12. What are his/her most enjoyable hobbies?
13. Does your child have friends at camp? Who?
14. Do you have any suggestions for us to help your child have a smooth transition and great time at camp?