

All About Me...

Camper Information Page

My Name _____ Nickname I like to be called _____ Age _____
Gender: Male Female Grade in school in the Fall _____
Event (Camp) Name _____ Dates of camp _____
Church & Pastor's name _____
E-mail address (please write legibly): _____

Camper's Section

Have you attended camp before? Y N Where and When?
I have ____ brothers and ____ sisters. **I am the:** oldest in the middle youngest
What are you looking forward to most at camp?

What are you the most worried about at camp? (The dark? Being away from home? Other?)

What are 3 of your favorite things to do with your time?

Where do you feel the closest to God?

One question I have about camp is:

Parent's Section

Please indicate with an "X" on the line where you child is:

Personality: Shy |-----| Extroverted

New Situations: Hesitant |-----| Eager

Activity Level: Very Quiet |-----| Very Active

How can we best relate to your child...

...in time of conflict/anger?

...if he/she has hurt feelings?

...if he/she is homesick?

Are there any special circumstances or situations you would like us to know about?

Thanks for your time! We can't wait to meet and hang out with you this summer! -ORM Program Staff