

**Please return one month prior to your child's departure to camp.**

**CAMPER PROFILE**  
**(To be filled out by parents)**

Name \_\_\_\_\_

Session \_\_\_\_\_ T-shirt size \_\_\_\_\_

The information that is provided by you when answering the following questions is vital to the staff and directors of **Camp Tall Timbers**. It will help us insure a good camping experience for your child this summer. Please be as thorough as possible. (If you need additional space use the area provided at the end of question 7 or you may attach additional sheets of paper.)

1. Are there any health problems or routine medications of which we should be made aware?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What activities do you and your child wish to emphasize while at **Camp Tall Timbers**?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Are there any unusual situations that might affect your child at camp, i.e., Divorce, Death, etc.?

\_\_\_\_\_  
\_\_\_\_\_

4. Does your child have any specific fears, i.e., ghost stories, thunder, etc.?

\_\_\_\_\_  
\_\_\_\_\_

5. How does your child get along with his or her peers at home and at school?

\_\_\_\_\_  
\_\_\_\_\_

