

PLEASE BRING THE FOLLOWING LETTERS TO CHECK-IN

A Letter To My Child's Leader

(To be completed by camper's parent/guardian)

Registered Sessions: _____

Dear Leader,

This is _____ 's _____ year at an overnight camp and _____
(number) *(number)*

year at Camp Bishop. I want him/her to go to camp because _____

While at camp, I hope that he/she will _____

My child is most happy when _____

most unhappy when _____;

enthusiastic about _____;

not fond of _____;

apt to be afraid of _____;

allergic to _____;

and is _____ at personal hygiene (brushing teeth, changing dirty clothes, hand washing);

and is _____ at taking care of personal belongings.

My child gets along with age-mates who _____.

At home my child is most often punished for _____.

My child lives with (please circle): Mom Dad Brother(s) Sister(s) Other: _____

He/she has the following responsibilities at home: _____

Please pay special attention to: _____

Has he/she been diagnosed as having any learning disability, emotional or behavioral problem? Yes / No.
If yes, please explain (the information will be held in confidence, and used only to help us provide the best possible experience for your child): _____

Parent/Guardian's Signature _____ (Please see reverse)

A Letter To My Leader

(To be completed by camper)

Dear Leader,

My name is _____ . My friends call me _____ .

I have _____ brothers, aged _____, and _____ sisters, aged _____.
(number) (number)

In my spare time, I like to _____

_____.

When I'm not in school, the things I like to do least are _____
_____.

I am good at _____
_____.

I am coming to Camp because _____
_____.

I hope to be able to do the following things at Camp this summer: _____
_____.

When I'm at camp, I don't want to _____
_____.

I get along with friends who _____
_____.

Last summer, I _____
_____.

I have finished the _____ grade at school.

Camper's Signature _____

(Please see reverse)