



Parent Questionnaire

Camper's Name: _____ Nickname: _____ Camp Session: _____

The following questions are designed to help us place campers into groups, plan our program, and provide helpful information to the camp director, counselors, and instructors who will be working with your child. All information is kept strictly confidential.

Grade completed by camp: _____ Age by camp: _____ Years at Mo-Ranch Summer Camps: _____

Siblings: _____ Names: _____ Ages: _____

Are both parents living? Yes No

Camper is living with:

Correspondence/Reports need to go to whom? _____ Contact info: _____

Does your camper have any specific fears? Yes No *Explain _____

Any physical limitations or special considerations we should be aware of? _____

Any special dietary needs? Vegetarian Vegan Gluten-Free Dairy-Free Diabetic

Are there specific foods your camper enjoys or will not eat? _____

Please describe your camper's swimming ability.

Please share with us any personality considerations. (Example: shy, nervous, tires easily, temper, natural leader, daydreamer, nightmares, etc.)

Please describe any behavioral situations which we should be aware of and best describe the best method of resolution.

What would you like for your camper to get out of the camp experience?

Please feel free to describe anything else that you think we should be aware of.