Summer 2016

LAKEVIEW DAY CAMP

Getting to Know You!

Say cheese!

Please attach a recent photo here
(like a school picture)
OR
send a digital photo to
info@LakeViewDayCamp.com

We want to be sure that this year at LakeView is the best ever! Your answers to these questions will help us get to know lots about you before camp begins.

Name _____ **Preferred Name** _____

Gender _____ **Age on June 27th** _____ **Hometown** _____

Grade in Sept. _____ **School in Sept.** _____

Our camper has been at LakeView for _____ **year(s)** (including this summer)

Our family has been at LakeView for _____ **year(s)** (including this summer)

The front is for the camper, the back is for the parents



For you to fill out...

What is your favorite...

...sport? _____

...free time activity? _____

...music band? _____

...food or snack? _____

What activity or accomplishment are you excited to conquer at camp this summer?

_____

_____

Tell us what you are most nervous about for camp this summer?

_____

_____

Please describe yourself, as your counselor, I am very excited to learn something special about you.

I am _____

_____

_____





MORE INFO ON THE BACK!

Please help your Division Leader get to know you!

For the parents to fill out...

It has become commonplace for parents to request other groupmates' addresses and/or telephone numbers for playdates or parties:

- ☐ It is OK to give our phone number, address and/or email in these situations.
- ☐ It is OK to give our Email Only in these situations.
- ☐ Please DO NOT give our personal information in these situations.

1. In addition to improving swim ability, having a huge amount of fun, and making great friends, what specific goals do you have for your child for the summer?

2. Do you want your child's skills to improve in any particular activity?

3. Is there anything unique about your child's eating habits?

4. Please describe your child's swimming and athletic ability:

5. Please share any difficult or challenging behaviors or characteristics that will help me provide your child with the most successful summer possible.

6. What would your child say they enjoy most during their free time (ex: art activities, sports, performing or hanging out with friends)?