

Camp Charles Pearlstein Parent Data Form

(To be filled out by PARENT)

Attach Recent
Photo Here
(if not sent with
registration form)

The information that you share with us is used to ensure your child's success at camp. Therefore, it is important that you answer each question *openly, honestly, and thoughtfully*. The information is kept in strict confidence.

New Camper _____ Returning Camper _____ Session(s) _____

Camper's Name _____

Mother's Name _____ Father's Name _____

Mother's Occupation _____ Father's Occupation _____

Is either parent a CCP Alum? N Y _____

Synagogue affiliation (please indicate if unaffiliated) _____

Marital status of parents (Please circle one) Married Single Divorced
Widow/Widower Legally Separated

Has marital status changed in the last twelve months? Yes/No (circle one)

Are there other special circumstances or family issues which may affect your child this summer?

How would you describe your child's personality to someone who has never met him or her?

How do you think your child will react to separation from his/her family? _____

Is your child looking forward to camp? Yes/No (circle one)

What do you think your child will enjoy most about camp? _____

Is there anything about camp that you think may present a challenge for your child? _____

Does your child have any medical conditions? Yes/No (circle one) Please describe: _____

Does your child require a special diet? Yes/No (circle one) Please describe: _____

Does your child have any physical limitations? Yes/No (circle one) Please describe: _____

Does your child wet the bed at night? Yes/No (circle one) Frequency _____

How do you handle it at home? _____

Does your child have any fears? Yes/No (circle one) Please describe: _____

Has your child received any professional intervention for emotional or behavioral issues (psychiatrist, social worker, or psychologist)? Yes/No (circle one) Please explain: _____

How does your child usually get along with adults? _____

With peers, your child is... (A) Very outgoing (B) Somewhat outgoing (C) Somewhat shy
(D) Very shy

Does your child have any behavioral problems in school? Yes/No (circle one) Please describe: _____

What discipline techniques that work most effectively for your child (i.e., "time-outs", discussions, etc.)? _____

In the discussion of Jewish topics, participation in services, and participation in Judaic-themed programming, your child will be...

- (A) Excited to participate (B) Willing to participate (C) Reluctant to participate

What suggestions do you have for us to make you child's CCP experience as wonderful as possible? _____

Where will you be while your child is at camp? (Changes of plans can be sent to the camp office at any time)

_____ I/We will be home

_____ I/We will be away from _____ to _____
in _____

During this time, I/We can be reached at _____ (phone numbers)
and _____ (e-mail address)

_____ I/We will also be away from _____ to _____
in _____

During this time, I/We can be reached at _____ (phone numbers)
and _____ (e-mail address)