



2010 CAMPER INFORMATION Camp Maas

In order to help us ensure a fun, healthy summer for all of our campers, please complete this form. The information you provide will be shared with your child's supervisors and counselors, confidentially and as necessary, to better provide your child with a successful camp experience.

Camper Name: _____ Village: _____

Grade as of Fall 2010: _____ Sex: M or F

Program: Mini A Mini B Mini C TSS/Hadracha
 Session 1 Session 2 Super Season

Has your child attended camp before? Please list name of camp and years of attendance.

Is your child eager to attend camp?

What does your child look forward to experiencing this summer?

Does your child have any fears/anxieties pertaining to camp that may affect the camp experience?

Are there any custodial issues in your family? If yes, please explain.

**PLEASE COMPLETE FRONT AND BACK.
FORM MUST BE SIGNED.**

My child may be released to: Mother _____ Father _____
Other _____

If other, please provide name and relationship: _____

My child is interested in Bar/Bat Mitzvah tutoring (once a week). Yes No

Bar/Bat Mitzvah Date: _____ Torah Portion: _____
Synagogue: _____

Please be sure to send copies (not originals) of tapes and books.

Please add any additional comments you wish to bring to our staff's attention that would help us better understand your child, allowing us to maximize his or her summer experience.

PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE