



# Casowasco Camper "Let's Get Acquainted" Form

Casowasco Camp and Retreat Center

Name \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_ Nickname \_\_\_\_\_

Program I am attending is \_\_\_\_\_

Age while at Camp \_\_\_\_\_ Grade I just finished in school \_\_\_\_\_

City I live in \_\_\_\_\_ My favorite subject in school is \_\_\_\_\_

I live with my:  Mother  Father  Sister(s)  Brother(s)  Grandmother/Grandfather  
 Other \_\_\_\_\_

This is my **FIRST** time at camp **OR** I've been to camp \_\_\_\_\_ times at Casowasco

Which programs have you attended? \_\_\_\_\_

The real reason(s) I signed up for camp is/are: \_\_\_\_\_

**Some activities I would like to do at camp are:** (please circle all that apply)

- |             |             |             |            |              |                            |
|-------------|-------------|-------------|------------|--------------|----------------------------|
| sing        | row a boat  | canoe       | play games | eat          | build campfires            |
| Bible Study | go hiking   | go fishing  | go sailing | swim         | try new things             |
| do crafts   | act/perform | play sports | worship    | do archery   | learn about nature         |
| read        | camp-out    | draw        | star gaze  | hang out     | go on the challenge course |
| relax       | dance       | do art      | have fun   | make friends | talk with my counselor     |
- special camp activities or other things, like: \_\_\_\_\_ and \_\_\_\_\_

**3 Things I'm most looking forward to at camp are:** \_\_\_\_\_

**2 Things I do best are:** \_\_\_\_\_

**I make friends:** (please circle) very easily                      pretty well                      it's hard to make friends

**What are 2 things you like to do with your friends?** \_\_\_\_\_

**Are you coming to camp with some friends?** (please circle) Yes    No    **If yes, how many?** \_\_\_\_\_

**Are they friends from camp or school or church?** (please circle) Camp    School    Church

**Do you want to make new friends?** (please circle) Yes    No    **Why or Why Not?** \_\_\_\_\_

I go to Church: (please circle) Always Sometimes Never My Church's name is: \_\_\_\_\_

1 thing I like about church is: \_\_\_\_\_

Something I wish was different at church is: \_\_\_\_\_

1 question I'd like to ask God is: \_\_\_\_\_

1 word that describes Jesus to me is: \_\_\_\_\_

1 thing I wonder about the most is: \_\_\_\_\_

2 things I am most afraid or worried about are: \_\_\_\_\_

This is how I would describe my swimming ability:

\_\_\_ I don't know how to swim, and I don't like the water.

\_\_\_ I don't know how to swim, but I like the water.

\_\_\_ I am a swimmer, but still learning.

\_\_\_ I am a strong swimmer, know strokes, and dive.

\*\* If you have been to Casowasco before, what was your swimming level? \_\_\_\_\_

Write 3 ways your counselor could be the best counselor ever

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

While you probably won't meet your counselors until you get to camp, if you had a question to ask them now, what would it be? \_\_\_\_\_

Other things I'd like my counselor to know are: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To provide the best possible experience for everyone, I am aware that possession of weapons, alcohol, drugs, or cigarettes or inappropriate behavior will result in dismissal from Casowasco. I know that I should leave at home these items: Radios/CD/MP3/iPods, Cell Phones, Money/Expensive Clothing/Valuables, Video Games, Hair dryers/curling irons, Aerosol Cans, Inappropriate Clothing, Food/Candy, Weapons, and Alcohol/Drugs/Cigarettes. I agree not to bring them to camp, and understand that all electronic devices brought to camp will be kept in the office until departure at the end of my program.

\_\_\_\_\_  
Camper Signature

\_\_\_\_\_  
Date

Please mail all paperwork **3 weeks** before you come to camp.

Casowasco Summer Forms  
158 Casowasco Drive, Moravia, NY 13118



# Casowasco Parent Questionnaire

Casowasco Camp and Retreat Center

Camper's Name \_\_\_\_\_ Nickname \_\_\_\_\_  
First Last

S/He is attending \_\_\_\_\_ at Casowasco  
Program Name

Person Filling Out Form \_\_\_\_\_  
First Name Last Name Relationship to camper

This summer, your child will be coming to Casowasco to live with other children his/her age and with well prepared counselors and staff of the highest caliber. These questions are designed to give your child's counselor and leadership staff a head start in getting to know your child to prepare for his/her time at camp. By providing honest input concerning your camper's emotional, physical, and social needs, you help us to ensure that s/he has the best camping experience ever. This confidential information will be shared only with those staff who will work closely with your child. If there is sensitive information you wish to disclose to a member of the leadership staff regarding a particular question or situation, please indicate that you would prefer to discuss this via phone and we will contact you. Feel free to use additional pages as necessary.

**\*After filling this out, please work with your camper to fill out his/her Camper "Let's Get Acquainted" Form.** Completed forms should be returned **3 weeks** before your child attends his/her program. As many things change in a camper's life, previous forms are not retained. Thank you for your help in ensuring a great week for your child!

I am sending my child to camp for the following reasons: \_\_\_\_\_  
 \_\_\_\_\_

How does your child feel about going to camp?  Confident  Excited  Nervous  Apprehensive

What is your child most looking forward to at camp? \_\_\_\_\_

How well does your child make friends?  Very Easily  Fairly Well  With Difficulty

Is your child afraid of darkness, people, animals, water, storms, or anything else? \_\_\_\_\_  
 \_\_\_\_\_

Describe your child's sleep habits?  Sleeps soundly  Sleeps restlessly  Sleepwalks  Bedwets

How do you handle sleepwalking/bedwetting? \_\_\_\_\_

How does your child react when staying overnight away from parents, siblings, or other relatives?

- Has fun & adjusts easily       Homesick       Fine during the day, upset at night  
 Camp will be the first time       Scared

The following describes my child's typical group behavior: (please circle as many as apply)

- |        |            |          |            |          |       |              |
|--------|------------|----------|------------|----------|-------|--------------|
| brave  | caring     | helpful  | respectful | honest   | shy   | confident    |
| happy  | thoughtful | gentle   | energetic  | friendly | open  | enthusiastic |
| scared | loner      | needy    | optimistic | excited  | kind  | cooperative  |
| leader | outgoing   | follower | attentive  | reserved | timid | independent  |

**\*Horse Camps Only: Does s/he have previous riding experience? \_\_\_ If yes, please list \_\_\_\_\_**

**Please tell us about your child's swimming/boating experience:**

- \_\_\_ My child is afraid of the water.
- \_\_\_ My child enjoys water play, but does not swim.
- \_\_\_ My child has had swim lessons, and is confident in the water.
- \_\_\_ My child knows many different strokes and can dive.
- \_\_\_ My child has had boating experience (canoe/rowboat).
- \_\_\_ My child has never been in a boat (canoe/rowboat).

**Are there any family situations that we should know about (ie: Divorce/separation/remarriage and with whom does the child live, death of a family member, etc?) \_\_\_\_\_**

\_\_\_\_\_

**Does your child have any physical or learning limitations? Please describe: \_\_\_\_\_**

\_\_\_\_\_

**Does your child have any dietary allergies, restrictions, or special food concerns? \_\_\_\_\_**

\_\_\_\_\_

**Please add any additional information/concerns/apprehensions we should know about your child. Include information about homesickness, special needs, ADD/ADHD, emotional strains, or other topics that will help us understand your child better. Please use additional paper as needed.**

\_\_\_\_\_

\_\_\_\_\_

To provide the best possible experience for everyone, my child and I understand that s/he must abide by camp rules/policies and understand that Casowasco reserves the right to send campers home for inappropriate behavior at the parent/guardian(s) cost and without refund because the safety and security of our campers and staff is our highest priority. I have spoken with my child regarding the items that are to be left at home (Radios/CD/MP3/iPods, Cell Phones, Expensive Clothing/Valuables/Money, Video Games, Hair dryers/curling irons, Aerosol Cans, Weapons, Inappropriate Clothing, Food/Candy, and Alcohol/ Drugs/Cigarettes). I agree not to send them with my child/that my child will not bring them to camp, and understand that electronic devices brought to camp will be kept in the office until the end of my child's program.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Please mail all paperwork 3 weeks before your child's program.**

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