

FOR CAMPER'S PARENT/GUARDIAN TO COMPLETE

CAMP MI-TE-NA
FOR BOYS

A LETTER TO MY CHILD'S COUNSELOR

CAMP FOSS
FOR GIRLS

Please fill out the following form and return to the Camp Registrar prior to arrival at camp. This is confidential information, restricted to staff usage. By filling it out, you give us an inside view of your child's character, their likes, dislikes and yours and their concerns. Although your child may be a returning camper, they may have a different counselor each year so we would appreciate you taking the time to fill this out.

Dates Attending:

- One-week sessions 6/24-6/30 7/1-7/7 7/22-7/28
 7/29-8/4 8/5-8/11 8/12-8/18 (Mi-Te-Na only)
- Two-week sessions 6/24-7/7 7/8-7/21 7/22-8/4 8/5-8/18 (Mi-Te-Na only)

Camper's Name _____

Parent/Guardian's Name _____

Camper lives with: Mother & Father Mother Father Other _____

Number of children in family _____

This is my child's _____ year at resident camp and their _____ year at Camp Foss/Camp Mitena.

We want our child to go to camp because _____

While at camp, we hope our child will _____

Our child is most happy when _____

With regards to their eating habits and least favorite foods, you should be aware that

She/he is is not a bedwetter.

Our child's interests are: _____

Things we feel deserve special attention are: _____

If you would like to share a private concern, please feel free to call the Director prior to camp.

PLEASE RETURN AT ONCE TO:



Jamie Kimball/Camp Registrar
Greater Manchester Family YMCA
Camping Services Branch
30 Mechanic Street
Manchester, NH 03101

