

Camper's Name _____ Nick Name _____

This letter will be given to your child's counselor and used to help us provide the best possible experience for your child. If the Health Care Staff should be aware of these needs please include them on the Health History Form.

Please take time to write this letter. The more we know about your child before he or she arrives at camp, the better we can prepare for their experience. We know you are busy and have a lot to do, especially in preparation for camp. Please make this a priority. Find some time to sit with your child and talk about their upcoming camp experience. He or she can even help you write this letter. Once completed mail back to us or upload to your ePACT account. Please complete entire letter.

Dear Counselor, This will be _____'s _____ year at an overnight camp and _____ year at **Sequoia Lake OR Camp Fox**. I want them to go to camp because

While at camp, I hope that my child will

My child is looking forward to

Is worried about _____

Is most unhappy when _____

Is enthusiastic about _____

Is afraid of _____

Is allergic to _____

Likes to eat _____

Does not like to eat _____

My camper is _____ at personal hygiene (brushing teeth, changing dirty clothes, hand washing, etc.), and is _____ at taking care of personal belongings.

My child gets along with other children who

My child has the following responsibilities at home

Please pay special attention to

Thank you for taking care of my child while at camp. I know my child will have a great time. Be safe and have fun...

Sincerely, _____