



Child's Name: _____

Session(s) Attending: _____

Photo: Please upload a current photo of your camper or provide a photo upon check-in of session date.
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PARENT/GUARDIAN QUESTIONNAIRE

1) Has your child been away from or at an overnight camp before? ☐ No / ☐ Yes, please explain

2) What would you like your child to gain from their camp experience this summer?

3) Please list any special behaviors or circumstances that the camp staff should be aware of:

4) Please list all household members and relationship to the child:

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CAMPER QUESTIONNAIRE

1) Nickname or name you go by: _____

2) If you have been to camp before, what did you like about it? What didn't you like about it?

3) Are you a returning Camp Santa Maria camper? If yes, which year(s) did you attend?

4) What are you looking forward to at camp this summer?

5) What activities are you interested in doing at camp?

6) Is there anything that you are nervous about at camp?

7) Additional comments: _____
