

**CAMP CHERITH**  
**CAMPER PROFILE SHEET**

Camp Cherith is gearing up for a fantastic summer and we're excited that your child will be joining us! Our goal is for every camper to have a ton of fun while meeting new friends, developing new skills, and learning about God. Since every camper is unique, your answers to the following questions will help our leaders understand *your child* better.

Name of camper \_\_\_\_\_

Your name and relationship to camper \_\_\_\_\_

Who lives at home with your child?

Dad    Stepdad   Occupation \_\_\_\_\_

Mom    Stepmom   Occupation \_\_\_\_\_

Guardian   Relationship \_\_\_\_\_   Occupation \_\_\_\_\_

Church(if any)\_\_\_\_\_

Pioneer Club(if any)\_\_\_\_\_

If your child has attended Camp Cherith in the past, what experiences seemed to have the greatest impact on his or her life? What did your child enjoy most? Any suggestions for improving camp?

Is this the camper's first time away from home for a week or more?  Yes  No

What is your child looking forward to most in his/her camping experience?

What are his/her hobbies and talents?

What personality traits best describe your child? (shy, outgoing, cheerful, strong-willed, sensitive, moody, calm, easygoing, restless, nurturing, aggressive, cooperative, dependable, athletic, self-reliant etc.)

Does your child make friends easily?

How do you hope your camper will benefit (socially, spiritually, emotionally, etc.) from their camp experience?

List the camper's fears and concerns, if any:

Does the camper have any emotional, behavioral, or academic issues that will impact the camping experience?  Yes  No

If so, please explain:

Please note any special health problems (including orthodontic attention, bedwetting, allergies, etc.):

Please add any additional comments here:

Please return this form to the registrar:  
Gerri Wilson  
17 S First Street A1503  
Minneapolis, MN 55401