

CAMPER INFORMATION

PARTICIPANT'S NAME: _____

Please complete the following form to assist us with meeting the needs of the named participant. All information is confidential and will only be utilized by the program staff. Please be thorough and specific in your answer.

GENERAL INFORMATION:

1. How does the participant relate to peers? _____
2. How does the participant relate to authority? _____
3. Does the participant have any behaviors that may be injurious to self and/or others? If yes, please comment. _____

4. Please list any specific indicators that show when the participant is becoming agitated and may show aggression. _____

5. What is the best method of discipline or reinforcement? _____
6. Does the participant get excited, frustrated, or anger easily? _____
7. Please indicate ability level of participant in the following areas:
Feeding self/eating habits _____
Communication skills _____
Toileting _____
Dressing/undressing _____
8. What type of supervision does the participant require? (choose one)
Close (one on one) _____
Requires minimal supervision within a small group (3 to 4) _____
Can function in a large group with minimal supervision _____
9. List any special interests that the participant may have. _____
10. List any strong dislikes that the participant may have. _____
11. What type of communication does the participant primarily use (verbal, sign, written)? Please provide a list of unique signs, sounds or words that the participant uses. _____

12. Will your child be attending camp with a CAP worker or other 1:1 assistant? YES NO

Please note that participants **MUST** meet the requirements of a camp without the 1:1 in order to attend. For example, a child who would otherwise require a Mini Session may not attend a Day or Teen session if the family provides a 1:1. All 1:1 assistants must submit and pass a City of Raleigh Background Check **PRIOR** to attending camp with your child.

Parent Initials _____

SUNBLOCK INFORMATION

13. Please apply sunblock to your child prior to sending them to camp. With your permission, staff will apply sunblock to your child throughout the day, as your child will allow it. You may send your own sunblock if you wish.

I give permission for Raleigh Parks & Recreation, Camp Friendly Staff to provide and apply Sunblock on my child at their discretion and as my child allows. (For your information, we use a Paba-free, water resistant Sunblock of at least SPF 15.)

I give permission for staff to provide and administer sunscreen. YES NO

Parent Initials _____

AQUATICS INFORMATION:

14. Participant is comfortable in shallow water. (ie: waist deep) YES NO
15. Participant is comfortable in water over their head. YES NO
16. Participant can swim independently without a floatation device. YES NO
17. Participant requires floatation device at all times. YES NO
18. Participant can swim the length of the pool without assistance. YES NO
19. Participant needs assistance entering and exiting the water. YES NO

Our policy requires that all participants, counselors, etc. wear life vests when swimming in a lake, any non-clear water, or any non-city pool. In a city pool, a life vest must be worn unless the participant has passed a city swim test.

Parent/Guardian Signature _____ Date _____