

SLC Summer Programs *Family Information Form*

CHILD'S NAME: BIR	THDATE:
We are looking forward to welcoming your child to or in an effort to get to know your child so that we can be	ur summer program! We ask the following questions best support their camp experience.
Please share a few words that describe your child's pers	onality:
What is the primary language spoken in your home?	
Please tell us about any previous group experiences you	r child has had:
Does your child know anyone who will be attending SLC	s camp? YES NO If yes, who?
How does your child handle new situations or being away	y from you?
Do you have any concerns about your child's developme	ent or behavior that would be helpful for us to know?
Is there anything else you would like us to know about yo	our child?
Parent's Signature	 Date

Thank you for taking the time to share this important information!