



APPLICATION

Please print or type. Use a separate form for each child you are sending to camp.
Feel free to make copies of this form.

Please complete this form in its entirety. Missing information will delay your child's enrollment in camp.

Camper Information:

Camper's Name: _____ Is this child in foster care?
 Yes No

Address: _____ Date of Birth: _____

City: _____ State: _____ Zip: _____

Camper's Race: _____ Camper's School: _____ School District: _____

Grade in which child is currently enrolled
and will complete during the 2020/2021 school year: _____

Parent/Guardian's Information #1

Name: _____

Does this person have custody of this child? <input type="checkbox"/> Yes <input type="checkbox"/> No
If not, should information about this child be shared with this parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No

Relationship to Camper: _____ Employer: _____
Home Phone: Primary Secondary Cell Phone: Primary Secondary Work Phone: _____ Typical hours: _____

E-mail Address: _____

Address: Same as camper's _____

City: _____ State: _____ Zip: _____

Parent/Guardian's Information #2

Name: _____

Does this person have custody of this child? <input type="checkbox"/> Yes <input type="checkbox"/> No
If not, should information about this child be shared with this parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No

Relationship to Camper: _____ Employer: _____
Home Phone: Primary Secondary Cell Phone: Primary Secondary Work Phone: _____ Typical hours: _____

E-mail Address: _____

Address: Same as camper's _____

City: _____ State: _____ Zip: _____

Other than the person(s) listed above, does anyone else have custody (joint, shared, or visitation rights) of this child?

If so, who? Name (s): _____

Relationship: _____

Have you shared camp information with this person (length of stay, communication policy, etc.)

Yes No

Would you like to have a copy of the Parent Handbook mailed to this person? If so - please contact our office with their current mailing address.

Yes No

Camper's Name: _____ Camper's Current Grade: _____

Emergency Contact Information

In case none of the adults listed can be reached, please provide the name and phone numbers of **someone (not a parent or guardian)** who will be available while your child is at camp. If the emergency person is the caseworker, please list phone number for evenings and weekends. It is not acceptable to only list the daytime telephone number. **Please make sure this person is available while your child is at camp and will be able to pick up and take care of your child if he/she needs to return home. By listing someone as an Emergency Contact you are authorizing them to pick your child up from camp.**

Emergency Contact #1:

Relationship to Camper:

Primary Home Cell Secondary Home Cell
Phone: () Work Phone: () Work

Emergency Contact #2:

Relationship to Camper:

Primary Home Cell Secondary Home Cell
Phone: () Work Phone: () Work

Tell us about your Camper!

This information is used to help our staff prepare for your child to come to camp. All information is confidential.

How did you hear about Sherwood Forest? _____

Has this child attended Sherwood Forest before? Yes No

If Yes, when? _____

The child's experience was positive mixed negative

Has this child attended any other camps? Yes No

If Yes, where and when? _____

How does this child feel about attending Sherwood Forest?

Excited OK with it Indifferent Scared/Nervous Reluctant

Has this child spent at least two nights away from parent/guardian successfully? Yes No

In your opinion, this child's self-concept is: positive mixed negative

What, if any, challenges do you think you will face with your child being at camp?

Is there anything we can do to help you and your child prepare for camp?

At school, has your child ever: (check all that apply and further describe below – this information is used by our staff to help best prepare for your child to attend camp and all information shared is strictly confidential)

- been on the honor roll been written up for discipline problems (calendar year: _____)
 been involved in extracurricular activities been suspended (calendar year: _____)
 received a special recognition or award been expelled (calendar year: _____)

At school, is your child in a:

- regular classroom, at appropriate grade level Homeschooled, appropriate grade level
 regular classroom, ahead _____ (how many) grade(s) for his/her age. Homeschooled, ahead _____ (how many) grade(s)
 regular classroom, behind _____ (how many) grade(s) for his/her age. Homeschooled, behind _____ (how many) grade(s)
 resource room, receiving help in: _____
 self-contained classroom in a regular school. List diagnosis and severity: _____
 self-contained classroom in a special school. List diagnosis and severity: _____

Does your child have an IEP (Individual Education Plan) Yes No

For: _____

If yes, may we obtain a copy of IEP? Yes No ***Copy of IEP may be submitted with application*

Camper's Name: _____ **Camper's Current Grade:** _____

Have there been any incidents or experiences in this child's life about which he/she might be sensitive? Yes No

If yes, please explain:

Does this child have a friend attending the same session, and if so, would they like to be in the same group? Yes No

Name of Friend _____

Friend must be in the same grade. We will do our best to honor this request, but we are unable to guarantee this placement. Please note: we do not place family members in the same cabin. This includes siblings and cousins.

Transportation Information

Please check only one place where campers will board the bus to camp and be dropped off after the session. See the Parent and Camper Handbook for more details:

- Kingshighway Entrance of Tower Grove Park
 Driven to camp by parent/guardian

- AT&T Store Parking Lot, 3270 Telegraph Road
 Holman Middle School/Pattonville Learning Center, St. Ann

School/Community Agency Reference

If your child meets regularly with someone from their school or a community agency, please provide their contact information. This includes if your child was referred to camp by their school or community agency. It could be a coach, teacher, activity leader, etc.

School/Agency Name: _____

School/Agency/Mentor Contact: _____

Address: _____

City: _____

State: _____

Zip: _____

Daytime

Evenings & Weekends

Cell

Phone: _____

Phone: _____

Phone: _____

E-mail Address: _____

Who is responsible for paying this camper's fee? the family the agency the mentor Other _____

Please check this box if information about your child should **NOT** be shared with the referral agency.

3rd Grade Camp

Explorer Camp (4th-5th grade)

Leadership Camp (6th-9th grade)

Camper Interview Information:

1st Grade

2nd Grade

3rd Grade

4th Grade

5th Grade

6th Grade

7th Grade

8th Grade*

9th Grade*

In order to best prepare you and your child for camp, we require that all new campers, and their parents, participate in an interview with our staff. Interviews help us get to know your camper and help your camper get to know us. Any child entering into the Leadership Training Program (All 6th Graders and any new 7th Grader) must complete an individual interview prior to starting summer camp.

Interviews will be scheduled once we have received your completed application materials. Please note that this is mandatory for any new campers in 3rd - 5th grade, all 6th grade campers, and any new 7th grade campers.

8th Grade Campers and Parents: Please note that your child will be required to participate in an interview in order to enroll in this program. During this interview, we will discuss the program expectations and time commitment, as Adventure requires a significant amount of school-year participation.

Sherwood Forest accepts new campers in 1st through 7th Grade. Campers in the 8th and 9th grade program must have successfully completed camp as 7th graders in order to enroll in the program.

Camper's Name: _____ Camper's Current Grade: _____

PAYMENT INFORMATION:

3rd Grade Camp: \$35 per child for 14-day session
Explorer Camp: \$50 per child for a 28-day session
Leadership Camp: \$75 per child for a 42-day session
Do not wait to enroll your child because of money. Please call us if you are concerned about paying for camp.

- My check/money order for \$_____ is enclosed.
- Please charge the credit card below \$_____.
- At this time, I am unable to pay for my child's camp fee and will contact camp regarding payment.
- I recognize the value of a camp experience at Sherwood Forest and understand that camp fees only cover a small portion of the total cost.
- I would like to make an additional donation of \$_____ using the above payment method.

Credit Card # _____

Security Code: _____

Expiration Date: _____

PARENTAL RELEASE

As the parent/legal guardian of the child herein accurately described, I have been informed about the activities of the camp, received and reviewed the Parent Handbook, and do give my consent and approval for him/her to attend Sherwood Forest and to participate in all aspects of the camp program, and I will inform the camp in writing of any activities that should be limited or prohibited. I understand that Sherwood Forest may send my child home for information omitted or not fully disclosed on this form. I have read the Camper Conduct policy and understand my child will be expected to follow these rules while at camp. In the event I am not available to receive this child upon his/her return, I hereby authorize Sherwood Forest to release him/her to a person(s) deemed appropriate by the camp, and I will notify the camp in writing of any person(s) who specifically should not be allowed to receive this child. In order for us to improve our programs, from time to time campers participate in evaluations and research studies. If you would prefer that your child not participate, please call our office. This child's photograph **may** / **may not** be used by Sherwood Forest for publicity purposes. Permission will be assumed if not specifically denied. *Sherwood Forest Camp is a non-denominational, multi-racial camp community. Sherwood Forest does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity, national origin, disability, age or status as a veteran.*

Please make sure all forms are completed in their entirety. Missing information will delay your child's enrollment.

Parent/Guardian Signature: _____

Date: _____

Parent/Guardian Name: _____

Please return this information to:

Sherwood Forest

2708 Sutton Boulevard

St. Louis, MO 63143

Phone: 314-644-3322 * Fax: 314-644-3330

Email: Programs@SherwoodForestSTL.org

STOP! Have you reviewed every section to ensure it is completed? Incomplete applications will be returned and will delay enrollment!

Camper's Name: _____ Camper's Current Grade: _____