



Please return this form by May 15th to Camp Kippewa at:

15 Myrtle Avenue, Westford, MA 01886 • (800) 547-7392 tel • (207) 933-2996 fax

Camper to Counselor Form

To be completed by all campers with their parents. One per camper.

Please fill out both sides of this form and return by **May 15th.**

Campers, please fill out this form for your counselors to read before you get to camp. They need your help to prepare for your arrival and to plan activities that you and your bunkmates will enjoy! Your counselors will get to know you quickly when you arrive at camp. The information here will give your counselors a head start to making this the best part of your whole year!

Camper's Name _____ **Nickname** _____ Session I Session II
(Please Print or Type)

Age _____ Grade Entering in Fall 2008 _____ This is my _____ year at Kippewa?

1. I'm excited to go to Kippewa because... _____

2. The camp activities I'm looking forward to most are... _____

3. Some of my hobbies / activities include... _____

4. The words that BEST describe me are... _____

(OVER)

