





The Adventure Begins Here!

Welcome to Camp Shamrock! We are very excited for camp. In order to make this the best camp

•		we want to know more about YOU! Please take a few minutes to fill out the following questions. If w ything that you think we should know, please add it on to the last page.
1.		about yourself! Likes/Dislikes
	b.	What are your favorite foods, drinks, snacks, restaurants etc.? (Any allergies, sensitivities, or health concerns)
	c.	What are some of your favorite games, activities, crafts?
	d.	What are some of your favorite places to go/things to do in the community?
2.		out you! What would we need to know about you when spending a whole day with you (any sensory issues, healt concerns, etc.)?
	b.	Is there anything that you don't like to do, bothers you, or are triggers for you?

c. Do you have any sensitivities (ex: Lights, noises, etc.)?







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a. What are some things you would like to do at camp that would make it the perfect

- b. If you came to camp last year, were there any things that you really enjoyed doing and would like to do again?
- c. Any recommended changes if you attended last year?

4. Skill Building

- a. What are one or two specific goals you have for your camper that we can help them reach at camp?
- b. Are there any specific ways you would like us to work on these skills to stay consistent with how they are worked on in the home and at school?
- 5. Can you please tell us a little more about when you go swimming: Do you like the shallow or deep end? Do you need a life jacket or belt on? Can you go in the deep end alone? Etc.
- 6. Would you like to have a one on one meeting with the Site Supervisor before camp starts to make camp a better experience or discuss any concerns?







Did we forget anything?

Please write down anything that you think we should know about you to help make your camp experience the best it possibly can!

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