



What level of Red Cross Swimming has your child most recently passed? \_\_\_\_\_

**JEWISH INVOLVEMENT**

Do you belong to a synagogue? \_\_\_\_\_ Which one? \_\_\_\_\_

Does your child attend religious school? \_\_\_\_\_

Family observances? \_\_\_\_\_

**VERY IMPORTANT INFORMATION**

Please list any special services your child receives at school or home: \_\_\_\_\_

Does your child have ANY MEDICAL NEEDS? \_\_\_\_\_

Please list all medications your child has taken during the past 12 months (including psychotropic drugs): \_\_\_\_\_

Please tell us about ANY FOOD ALLERGIES \_\_\_\_\_

Please include any other information which may be helpful in making your child's summer enjoyable and productive. Feel free to elaborate on a separate sheet of paper.

**Parent or guardian signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Please call the camp office to update the information on this camper profile if changes occur before or during camp.