

Child's Full Name: \_\_\_\_\_

Name child is called: \_\_\_\_\_

Child's Birthdate: \_\_\_\_\_

Current Age (years): \_\_\_\_\_

Grade Level: \_\_\_\_\_

School Attending: \_\_\_\_\_

Caregiver Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Has the child spent time away from home at camp or similar setting in the past? \_\_\_\_\_

\_\_\_\_\_

Child's ability to swim: \_\_\_\_\_

Does child have permission to swim at camp?: \_\_\_\_\_

Is child interested in riding a horse at camp?: \_\_\_\_\_

Does child have permission to ride a horse at camp?: \_\_\_\_\_

Does the child have any conditions that may affect participating in camp activities? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When did the child first report sexual abuse? \_\_\_\_\_

\_\_\_\_\_

Who was involved in assaulting the child? \_\_\_\_\_

What are the two most important things we should know about this child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What type of discipline is effective with this child? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What triggers this child's negative behavior? \_\_\_\_\_

\_\_\_\_\_

What are the signs that this child's behavior is about to escalate? \_\_\_\_\_

\_\_\_\_\_

What actions help de-escalate this child's negative behavior? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scan and email completed form to: [CAMPVICTORYTEXAS@GMAIL.COM](mailto:CAMPVICTORYTEXAS@GMAIL.COM)