

What I Want My Counselor to Know About Me

(Please print legibly)

Dates at Camp _____

Name (First & Last) _____ Age _____

Where are you from? _____ Grade in school just completed _____

What program are you participating in at camp? _____

What instrument do you play (if coming for band or orchestra) _____

Have you been to a resident camp before? _____ Where? _____

Do you have brothers & sisters? _____ How many & Ages? _____

Any other information that might make your stay at camp more enjoyable? _____

(Parents - your counselor does not have access to student health forms. If your child is asthmatic, diabetic, has a learning disability, etc., this is the best place to give them access to necessary information.) **This information will be kept confidential.** Please return this form with your completed health form in advance of your arrival at camp to:

INTERNATIONAL MUSIC CAMP, 111-11th Ave SW, Minot, ND 58701 (before June 1)

INTERNATIONAL MUSIC CAMP, 10834 Peace Garden Dr, Dunseith, ND 58329 (June 1 - July 31)