



3rd, 4th and 5th Grade Camper Goals and Objectives

Camper's Name: _____ Session 1 Session 2 Grade: _____

Parent/Guardian Name(s): _____

To help answer some of the questions, here is a small sample of the activities we offer.
Remember, this is only a sample. Please feel free to list something not shown.

Arts	Adventure Sports	Aquatics	Outdoor Living Skills	Ideas	STEM	Life Skills
Pottery	Climbing Tower	Swimming	Outdoor Cooking	Library	Gardening	Responsibility
Photography	Archery	Canoeing	Campfires	Reading	Animal Science	Teamwork
Dance	Team building	River trips	Shelter-building	Journalism	Plant life	Independence
Theater	Nine Square	Jr. Lifeguards	Camping	Writing	Nature hikes	Trying New Things
Music	Zip-Line		Tool crafts	Languages	Chemistry	Leadership
Improvisation	Low-Ropes		Knot tying	Book Club	Cooking	Making Friends
Crafts	Sports Activities		Orienteering	Comics		Problem-Solving
Painting			Backpacking			Communication
						Self-Discipline
						Planning
						Conflict Resolution

For PARENT/GUARDIAN to complete:

1. What do you consider your child's greatest strengths, skills, and/or talents?

2. What hobbies and/or interests does your child have outside of school?

3. What goals do you have for your child this summer?

4. What activities do you want your child to participate in?

5. What skills do you hope your child develops or improves while at camp?

6. Have you reviewed the specific information about the program for which your child is applying? Yes No

I have reviewed the information about Sherwood Forest Camp and the Explorer program. I will provide support and encouragement to help my child successfully complete this program.

Parent/Guardian Signature: _____ Date _____

If you have any questions or concerns, please do not hesitate to call us at 314-644-3322.

(Please don't forget the to complete the other side) **OVER** ➔

4th and 5th Grade Camper Goals and Objectives For CAMPER to complete:

1. Whose idea was it for you to apply to this Program? _____
If it was not your idea, do you want to apply to and participate in the program? Yes No
2. Why do you want to come to camp?
3. How do you feel about attending Sherwood Forest Camp this summer? (Please mark any that describe your feelings.)
 Excited Excited, but a little nervous It could be fun I think it will be an adventure
 I'm OK going but, I would be OK staying home, too Scared I don't want to go
 Other (if your feeling isn't listed or you want to add something, please write it here): _____
4. Do you understand that **you will be at camp for 14+ days** and are you willing to stay at camp that long? Yes No
5. To begin preparing for the Leadership Training Program, all campers participate in overnight trips - which consist of hiking, sleeping outdoors, cooking over a fire, and other outdoor living skills you will learn at camp. **4th and 5th grade** campers may also participate in trips that include canoeing. Are you willing to participate in these trips? Yes No
6. What are you most looking forward to while you are at camp?
7. What goals would you like to achieve while at camp or what would you like to improve or work on while at camp?
8. Is there anything that is concerning/worrying/making you nervous about coming to camp? If so, what?
9. What else do you want us to know about you?
10. Any other comments or thoughts?

It is my choice to apply to this program and I want to participate in this program. I have reviewed the information about Sherwood Forest Camp and the Explorer program. I would like to be considered for participation in this program.

Camper's Signature _____ Date _____



Camp Director Reviewed: _____ Date: _____ Wellness Coordinator Reviewed: _____ Date: _____

Follow-Up Needed: Yes No Scheduled Date: _____ Completed

Reviewed at Camp:

Village Director's Initials: _____ Counselor's Initials: _____ Camper's Initials: _____ Date: _____