

Elks Camp Grassick  
PO Box F, Dawson, ND 58428  
701-327-4251  
campgrassick@gmail.com

Companion Camp  
Sibling Application

Date of Application: \_\_\_\_\_ Date Received at ECG: \_\_\_\_\_

### PERMISSION

I, as parent/guardian of this child, request that my child be admitted to Elks Camp Grassick for the One Week Companion Camping Session. I give permission for Elks Camp Grassick to obtain information from my child's school, teachers, therapists, or other persons/organizations to help determine eligibility for this camping session. I understand that failure to provide honest and accurate information about my child could result in non-acceptance or early dismissal from Camp Grassick.

Parent/Guardian Signature: \_\_\_\_\_

### IDENTIFYING INFORMATION

Name of Child: \_\_\_\_\_ Gender:  Male  Female

Nickname or Preferred Name: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age as of camp start date: \_\_\_\_\_

Name of Companion Camper: \_\_\_\_\_

Relationship to Companion Camper: \_\_\_\_\_

Name of Parent(s) or Guardian(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian #1:

Place of Work: \_\_\_\_\_ Telephone: \_\_\_\_\_

Parent/Guardian #2:

Place of Work: \_\_\_\_\_ Telephone: \_\_\_\_\_

Emergency Contact: (must be someone other than parent or guardian)

Contact Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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## SUMMER CAMP FEE AGREEMENT

**Please do NOT send payment until your child has been accepted.**

Camper's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Please check which camp the child will attend or has attended:

Three Week Camping Session: \$700.00

Two Week Camping Session: \$500.00

One Week Companion Camping Session – Camper: \$300.00

One Week Companion Camping Session: - Companion \$100.00

Parent/Guardian: If you are paying for all or part of your child's camp fee, please indicate in the spaces below. Camp fees may be made in payments.

Please check the amount you are able to pay or check if you need full or partial sponsorship for your child to attend Elks Camp Grassick.

I hereby agree to pay \$\_\_\_\_\_ for my child to attend Elks Camp Grassick.

I am requesting a partial sponsorship for my child to attend Elks Camp Grassick.

I am requesting a full sponsorship for my child to attend Elks Camp Grassick.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions, please feel free to call camp at 701-327-4251.

Please send this agreement to: Elks Camp Grassick  
PO Box F  
Dawson, ND 58428

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## GENERAL INFORMATION

Name of School Child is Attending: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Child Lives with:  Mother  Father  Both  Guardian(s)  Other: \_\_\_\_\_

Number of siblings: \_\_\_\_\_ Number of children living in home: \_\_\_\_\_

Does this child have any special dietary needs? \_\_\_\_\_

Describe this child's swimming abilities:  non-swimmer  Beginner

Intermediate  Advanced

Does he/she need to wear lifejacket  earplugs

(All children will wear lifejackets on boats and in deep water)

## SOCIAL STUDY

1. Personal Traits: Please describe this child's maturity level, self-esteem, and level of independence in the home environment.
  
  
  
  
  
  
  
  
  
  
2. Social Adjustment: How does this child get along in the home? (Relationship to parents, siblings?)

## SOCIAL STUDY CONTINUED

3. Briefly describe the relationship this child has with his/her companion camper.
  
4. How does the child get along at school and with peers?
  
5. Does this child exhibit any unusual discipline problems in his/her home environment?  
 Yes  No      In school?  Yes  No      In social settings?  Yes  No  
If yes, please explain.
  
6. Please list a few interests or hobbies of this child.
  
7. Is your child afraid of anything? Does your child have nightmares? Please describe. Is there anything that comforts him or her?
  
8. Has this child ever attended a summer camp before?  Yes  No  
 Has attended Elks Camp Grassick  Has attended \_\_\_\_\_  
If not, do you feel that this child could adjust to being away from home and in a camp environment?

Please attach any additional, pertinent information about this child.