

## PARENT QUESTIONNAIRE

NAME OF CAMPER: \_\_\_\_\_

please select appropriate session:

SESSION: \_July 8 / \_July 22 / \_August 5

How did you hear about our camp?

Does your son/daughter have a roommate request?

Regarding your son's/daughter's social or physical maturity, what should we consider in assigning him/her to a dormitory room?

Is this your son's/daughter's first experience at an overnight camp?

Is there school or family circumstances we should be aware of?

For how long has your son/daughter been playing squash?

If you will be away from home while your son/daughter is at camp, please give us the dates when you will not be at home and an address and phone number where you or another relative can be reached:

**PLEASE MAIL THIS FORM BACK AT LEST TWO WEEKS PRIOR TO BEGIN OF THE SESSION TO:**

**HANSI WIENS SQUASH CAMPS  
7 AUSTIN AVENUE, APARTMENT 1  
HANOVER, NH 03755**