

Child's Name
Nickname
Birthday
Allergies
Primary Contact
Contact Phone #
Email Address

Does your child have a sibling/friend at Impulse City? Who?

Please attach a photo of your child here.

Do they want to be placed together in groups?

What things/ideas/characters does your child like?

Is there anything that your child avoids?

Describe your child's overall temperament.

What strategies work best when your child feels/acts out of control?

Are there any language barriers or vocabulary substitutions your child regularly uses?

Please describe your child's pace on a walk, field trip, or museum (slow, medium, fast, lightning):

What is your child looking forward to about Impulse City? (on a scale of 1-10, 10 being high)

Theatre	Drawing	Let's Pretend/Imaginative Play	Field Trips	Singing/Rock N' Roll
Music	Papercrafts	Hotwheels, Trains, Vehicles	Nature Walks	Building/Engineering
Improv	Digital Art	D&D & Role Playing Games	Petting Zoo	Coding & Technology
Dance	Sculpture	Legos, Duplos, Magnatiles	Scavenger Hunts	Retro Arcade Games
Painting	Arts & Crafts	Sports & Outside Games	Technical Theatre	Swimming/Water Play

Please list other interests and anything else that would help make this a wonderful camp experience: