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## **Climbing Winter 2017 Camp Intake Form**

Camper Name:

Camper Age as of Camp Start Date:

Parent/Guardian Name(s):

Who is authorized to pick up the camper? Please give name and relationship to child, such as babysitter, aunt, mother, etc.

The standard drop-off/pick-up times are 9 AM and 3 PM. However, drop-off and pick-up times are flexible, (for an extra charge per hour). If you anticipate using a non-standard drop-off or pick-up time for your child's whole week at camp, please indicate this below. During the camp, you can let the front desk or camp directors know the day before if you will drop-off early or pick-up late.

Contact number(s) to call if camper is ill or injured, (please give number, name, and relationship to child, such as grandparent, aunt, father, etc.):

Please check which of the following best applies to your child:

- My child is very comfortable climbing.
- My child enjoys climbing but needs some positive reinforcement during instruction.
- My child sometimes needs a little reassurance to overcome her/his anxiety about climbing.
- My child often experiences significant fear/anxiety when climbing.

What is your child's level of climbing experience, (either indoor in a gym or outside)?

- My child has climbed many times.
- My child has climbed a few times.
- My child has climbed one or two times.
- My child has never climbed before.

Does your child have any allergies we should know about?

- No, my child does not have any allergies.
- Yes

If your child has any allergies, please explain:

Is your child currently taking medication? If yes, and the medication needs to be administered during camp, please indicate this here, and we will be in touch with a separate medical release form.

- No, my child is not taking any medication.
- Yes.

List any conditions requiring special consideration, accommodations, or restrictions while at camp:

List any past medical treatment that may affect participation in camp:

List any activities from which the camper should be except for health reasons:

Please list any special goals your child has for the camp or any other information that you would like us to know:

Photographic Waiver:

I, \_\_\_\_\_, give / do not give (circle one) the Stronghold Climbing Gym permission to use photographs of my child in the gym's general publicity campaigns.

Signature/Initials if Electronically Signing:

Date: