



www.cobbossee.com
Josh & Jill Cohen, Directors

WINTER (Until May 15th)
17254 Gulf Pine Circle, Wellington, FL 33414
p: 800-473-6104 f: 207-933-4560

SUMMER (After May 15th)
P.O. Box 299, Monmouth, Maine 04259
p: 800-473-6104 / 207-933-4503 f: 207-933-4560

WE KNOW YOUR CHILD,
BUT HIS COUNSELORS
MAY NOT.
**PLEASE ATTACH
A RECENT CAMPER
PHOTO HERE!!**
You may also email
a photo to
jill@cobbossee.com

CAMPER TO COUNSELOR FORM

To be completed by all campers with their parents/guardians. One per camper.
Please fill out both sides of this form and return by **May 15th**.

Campers, please fill out this form for your counselors to read before you get to camp. They need your help to prepare for your arrival and to plan activities that you and your bunkmates will enjoy! Your counselors will get to know you quickly when you arrive at camp. The information here will give your counselors a head start to making camp the best part of your whole year!

Camper's Name _____ Nickname _____ Session I Session II
(Please Print or Type)

Age _____ Grade Completed in June 2011 _____ This is my _____ year at Cobbossee.

1. I'm excited to go to Cobbossee because... _____

2. The camp activities I'm looking forward to most are... _____

3. If I have one concern about camp it is: _____

4. The words that BEST describe me are... _____

