

Camp Until A Cure

Diabetes Youth Foundation Camp – Noblesville, IN

Special Requests and Information

Campers Name: _____

Sessions of camp: ___ 1st week session 06/06 – 06/12 or ___ 2nd week session 06/13-06/19 or

___ 3rd week session 06/20- 06/26

___ Day Camp 06/14-06/18 ___ Day Camp 06/21-06/25

We will make every effort to take this information into account for group placement and daily care. At times, people request to be in a cabin with another camper who is greatly different in age. Since the groups are made up by date of birth, we are not always able to satisfy this request. We will do our best in every case, All arrangements are made on a first come first serve basis so there is a great advantage to returning this sheet as soon as possible. Some of you have requested roomies in the past and you must request them on this sheet. Some groups are too large to be put together so they have to broken up in some instances so that everyone will be with at least a few of their requested roomies. These will be applied as ages and cabin space are allowed. REMEMBER - once a cabin is full, no changes can be made.

Special Needs: (My camper needs assistance with (giving shots, blood sugar testing, putting on clean clothes every day, etc.)

My child may need extra help due to: (bed wetting, hearing difficulties, etc.)

My child has some concerns or fears that might need to be taken into account (first time away from home, afraid of the dark, afraid of the water, etc.)

Group Requests (Please try to put first and last names of kids you request to bunk with)

Please return this sheet as soon as possible if there is any additional information that is not on the original.
PLEASE mail to DYF camp, 817 South Tibbs Ave, Indpls, IN 46241 or fax 317-243-4488