

YMCA Camp Pinewood Family Information Sheet

Family Name: _____ Family Camp Attending: _____

To help us get to know your family a little better and help you meet your goals while you are here, we are asking for the following information. This information will be shared with our staff and used in the best interest of your family.

Number of years your family has attended Pinewood? _____

If this is your first year, how did you hear about Pinewood? _____

Are you sharing a cabin with any other families while here? _____

Are you related to, or friends with any other families who are attending Family Camp? Y N

If so, who are they, and what is your relation: _____

What is your family's favorite thing about Family Camp? What are you most looking forward to? _____

If you could change one thing about your last Family Camp what would it be? _____

List three goals you have for your family while at Family Camp together:

1- _____

2- _____

3- _____

Is there anything else you would like to tell us about your family? _____

Please complete this with our family and fax or e-mail this form to
Camp Pinewood **30 days** prior to the weekend you will be attending.

You may fax it to (231) 821-0487 or e-mail it to brankin@ymcachgo.org