

KILDONAN'S



Application for Admission 2021

July 5 thru August 14

NEW Camp Location:

476 Skiff Mountain Road, Kent, CT 06757 (*Marvelwood School campus*)

Camp Dunnabeck is a non-profit organization of Kildonan Services, Inc.

Mailing Address:

PO Box 392 Amenia, NY 12501

Camp Office: 845-373-2002 - Email: campoffice@kildonan.org

APPLICATION CHECKLIST:

- Completed Camp Dunnabeck Application
- Review admission materials
- Send a copy of the most recent educational and psychological testing which includes the Wechsler Intelligence Test with subtest scores.
Required for all applicants.
- Include a recent photograph of the applicant.
- \$30.00 application fee (non-refundable).

If you have any questions about the admissions process or the application form, please contact the camp office.

Kildonan's Camp Dunnabeck admits students of any race, gender, creed, and national or ethnic origin to all the rights, privileges and activities generally accorded or made available to campers.

CAMPER INFORMATION

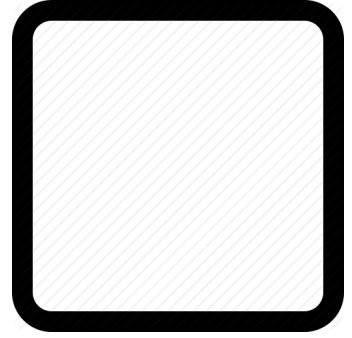
Applying for: Boarding Camper

Full Day Camper

Half-Day Camper

Online Camper

Check one: Male Female



Date of Application: _____

Please attach a current photo

Applicant's Name: _____
(FIRST) (MIDDLE) (LAST)

Preferred Name: _____ Date of Birth: _____

Address: _____
(NUMBER and STREET)

(CITY) (STATE) (ZIP CODE) (COUNTRY)

Names / ages of sibling(s) (if applicable): _____

Is there a history of Dyslexia in the family? ___ Yes ___ No If yes, please describe: _____

Does the applicant have any allergies? ___ Yes ___ No If yes, please describe: _____

How did you hear about Camp Dunnabeck? _____

Has the applicant attended Camp Dunnabeck before? ___ Yes ___ No If so, when? _____

Summer camps previously attended: _____

EDUCATIONAL HISTORY

Applicant is currently enrolled in _____ grade; will be entering _____ grade next year.

Name of current school: _____ grades attended: _____

Address: _____

Does the applicant currently receive support services? ___ Yes ___ No

If yes, please describe: _____

FAMILY INFORMATION

Parent 1: _____
(FIRST) (MIDDLE) (LAST)

Address: _____
(NUMBER and STREET)

(CITY) (STATE) (ZIP CODE) (COUNTRY)

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Occupation: _____

Post-Secondary Education and Degrees: _____

Parent 2: _____
(FIRST) (MIDDLE) (LAST)

Address: _____
(NUMBER and STREET)

(CITY) (STATE) (ZIP CODE) (COUNTRY)

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Email: _____

Occupation: _____

Post-Secondary Education and Degrees: _____

Are you planning to apply for Financial Aid? ___ Yes ___ No

Parents are ___ Together ___ Divorced ___ Separated

With Whom does the applicant live? _____

Please note any special circumstances: _____

1. Please describe your child's difficulty with basic skills (e.g., reading, writing, spelling):

2. Additional information that should be available to those working with your child:

3. What does your child enjoy doing during his or her free time? What hobbies, interests, or activities are most important to him or her?

For campers applying for boarding only:

4. Every camper at Dunnabeck is paired with a roommate. Describe the kind of person your camper would like to live with?

NOTICE:

CAMP DUNNABECK RESERVES THE RIGHT TO WITHDRAW A CAMPER'S ACCEPTANCE OR TERMINATE PLACEMENT IF INFORMATION PERTINENT TO YOUR CHILD'S APPLICATION HAS BEEN EITHER INTENTIONALLY OR INADVERTENTLY WITHHELD.

Parent / Guardian Signature: _____

Parent / Guardian Signature: _____

Date: _____