

2012 Reach Out Supplemental Application

Camper's Name: _____

Camper's Session: (please circle one)

June 10-15, 2012

August 12-17, 2012

Reach Out is not a medically staffed program. We do have registered nurses on site twenty-four hours a day, but participants must demonstrate abilities in basic self-care; be able to walk 1/4 mile; and be continent. This supplemental application will be reviewed by our staff and you will be notified of the participant's acceptance into the program.

Is the camper able to...?	By Self	With Assistance
Walk on a dirt road		
Climb stairs		
Shower or bathe		
Maintain daily hygiene		
Get Dressed		
Swim		
Use the toilet		
Communicate with others		

Does the camper experience any of the following? (if yes, please explain so we can best respond)

Seizures _____

Incontinence—during day or night? _____

Allergies—food, insects, medicines _____

Diabetes _____

Skin Problems _____

Sleeping Problems _____

Headaches _____

What sort of special assistance does this camper need?
