

Dean Request Form

Please take time to fill this out and return it to the Camp Director before your week of camp. Communication is key for a successful week of camp and WCSC will try to accommodate you and all your needs. Thank you for your commitment to impacting lives for eternity!

What time would you like campfire? _____

What time would you like snack served? _____ *Snack is not available after 10:30pm*

What time would you like the lifeguard at the pool? This can include 1-2 evening swims.

Sunday	_____
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____

What are your evening activities?

Sunday	_____
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____

Are you doing any special activities that would be good to record for the Memory DVD? When?

Are there any special times that you need WCSC Staff or the Camp Director?

Do you have any special needs / request for your week of camp?

Comments: