

Durango Mountain Camp

Please Attach a Photo Here

At Colorado Timberline Academy



Application For Admission

Name of camper: _____

Date of birth: _____ Age as of June 1, 2010

Home address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ e-mail: _____

Name of father: _____ Occupation: _____

Home address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____ e-mail: _____

Name of mother: _____ Occupation: _____

Home address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____ e-mail: _____

Names and ages of siblings: _____

44000 Hwy 550 N. Durango, Colorado 81301 970-385-1778

Education Information

Present school: _____ Grade: _____

Address: _____ Phone: _____

Principal: _____ Dates attended: _____

Who referred you to come? _____

Most recent tutor: _____ Phone: _____

Medical Information

Camper's physician: _____ Phone: _____

Address: _____

Any serious illnesses/injuries? _____

Any current medical conditions? _____

Any current medications? _____

Any psychological or emotional conditions that you would like us to know about? _____

Is your child under current psychiatric care? _____

Dietary restrictions: _____

Camper's Height: _____ Weight: _____

Social Information – Please explain in full. Use additional pages if necessary.

Has your child been away from home for any length of time? Homesickness? _____

What group or individual activities does your child enjoy? _____

Is there any history of behavioral difficulty with family, peers, or in the academic setting? _____

What are your child's chief strengths? _____

What are your child's areas of greatest needs? _____

Parents, please write a brief statement of what you expect from this summer involvement:

Campers, please write a brief statement of what you expect from this summer involvement:

Co-Curricular Activity Emphasis

Durango Mountain Camp features six “major focus” outdoor activities *including Kayaking, Horsemanship, Mountain Biking, Outdoor Skills, Climbing, Scuba*. Each of these activities will last @ 1 - 2 weeks. Campers may choose up to 3 of these 4 activities. If a camper has a specific strong interest, the camper may elect to choose just 1 or 2 activities and participate in that activity for a longer length of time.

Camper's first activity choice: _____ For how long? _____

Camper's second activity choice: _____ For how long? _____

Camper's third activity choice: _____ For how long? _____

Please enclose a copy of your child's latest diagnostic testing and test scores.

Please send this completed application with a \$100 processing fee to:

Durango Mountain Camp

44000 Hwy 550 N.

Durango, CO 81301

970-385-1778

Any Additional Comments?

Parent Signature: _____ Date: _____

Thank you for your time and effort with this application.