

## PO Box 54 Milton VT 05468 info@campdaybreak.org | www.campdaybreak.org

Camp Daybreak is a registered 501c3 nonprofit organization.

We are open to all children who meet the criteria for acceptance without regard to race, color, national origin, age, sex, gender identity, or disability.

## CAMP DAYBREAK 2026 APPLICATION

(PLEASE RETURN BY April 1, 2026)

Campers arrive at CAMP DAYBREAK on Monday August 3rd and depart on Sunday, August 9th, 2026. Additional information is also available online at www.campdaybreak.org.

## Camp Daybreak operates at no charge to campers or their families.

Send application and direct all correspondence to:

Camp Daybreak
PO Box 54 Milton VT 05468
info@campdaybreak.org

Note: Please fill out this application as neatly, thoroughly, and as honestly as possible so that we can determine if Camp Daybreak is appropriate for this child. Our goal is to provide a successful and safe camp experience.

CAMPER INFORMATION:

Name:

Gender: \_\_\_\_ Age: \_\_\_\_ Date of Birth: \_\_\_ / \_\_/

Address: \_\_\_\_ City: \_\_\_ Zip: \_\_\_\_

Sending School: \_\_\_\_\_

Parent/ Guardian: \_\_\_\_\_

Phone: (\_\_\_\_ ) \_\_\_ Email: \_\_\_\_\_

CAMPER T-SHIRT SIZE: (YOUTH) M L (ADULT) S M L XL

1.	Has the child attended any summer camp? Yes No
	If yes, please give a brief description of this experience:
2.	Each camper is given 1-on-1 support during camp by being assigned a Big Sibling.  Please check box: Will the child benefit most from having a Big Brother  or Big Sister ?  Please explain why (please be aware that most of our volunteer staff are female):
3.	Description of Referral Agency's involvement with child and family.
4.	Briefly describe the child physically.
5.	What are the camper's recreational and/or other interests?
6.	In the space below (use additional paper if necessary) give a summary of all relevant information concerning this child, including personality characteristics, special needs, family background, and anything else that may assist the camp staff in understanding and working with this child. (Specific challenges will be listed later on in the form.)
7.	Briefly explain the child's type of educational setting. Include basic information on special education services being provided (special class, resource room, tutor, etc.). It would be most helpful for us to know whether the child has an IEP but obviously, this information can only be shared if there is consented to the child's parent/guardian.

8.	children, outdoor activities, adult competitive opportunities. Please	ntains many factors that influence a child's behavior attention, physical and emotional stimulation, and e describe how you anticipate this child would resp foods that the child is averse to? (Use additional	d cooperation and bond to such an			
9.	Transportation:					
	Who will be responsible for transporting the child TO camp? (PLEASE PRINT CLEARLY.)					
	Name:					
	Address:					
	City:	State:	Zip:			
	Home Phone: ()	Work Phone: ()				
	Email:					
	Name:					
	City:	State:	Zip:			
	Home Phone: ()	Work Phone: ()				
	Email:					
10	. Who is filling out this form? (PLEA	ASE PRINT CLEARLY.)				
	City:	State:	Zip:			
	Home Phone: ()	Work Phone: ()				
	Email:					
	Referral Agency:					

specifi	er to best use our camp staff and your valuable information, we ask that you identify a number of c challenges, or challenge areas, that our staff could begin working on immediately. List these in ace provided. Please use additional paper if necessary:
A very	ENGE IDENTIFICATION: short statement identifying the challenge.
	ENGE DESCRIPTION: ective and subjective description of the challenge identified, how it affects them (or others),
SUGG This co	ESTED PLAN: build be a brief description of a strategy currently in use, or a suggested plan in dealing with the lied challenge.
1.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?
	Helpful Techniques:
2.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?
	Helpful Techniques:
3.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?

	Helpful Techniques:
4.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?
	Helpful Techniques:
5.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?
	Helpful Techniques:
6.	Challenge Identification:
	Challenge Description:
	What might trigger this challenge/behavior?
	Helpful Techniques