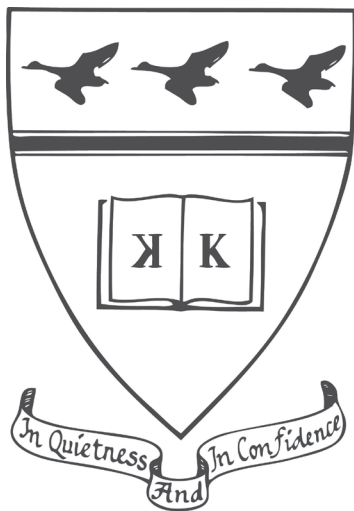


CAMP DUNNABECK

425 Morse Hill Road
Amenia, NY 12501
Phone: 845.373.2012

Fax: 845.373.2004
admissions@kildonan.org
www.kildonan.org



Camp Dunnabeck at Kildonan Application for Admission

APPLICATION CHECKLIST:

- Completed Camp Dunnabeck Application
- Review admission materials
- Forward copies of the most recent educational and psychological testing. The Weschler Intelligence Test with subtest scores is 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 forms, please contact the Admissions Office at 845.373.2012.

Dunnabeck at Kildonan 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 students at Dunnabeck.

CAMPER INFORMATION

Applying for:

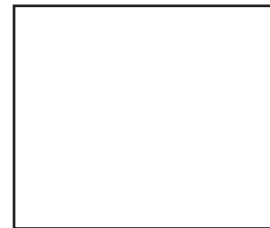
Boarding

Full Day

Half Day

Male

Female



Please attach a current photo

Applicant's Name:

(FIRST)

(MIDDLE)

(LAST)

Preferred Name: _____

Date of Birth: _____

Address:

(STREET AND NUMBER)

(CITY)

(STATE)

(COUNTRY)

(ZIP CODE)

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

Is the applicant adopted? Yes No

Is there a history of dyslexia in the family? Yes No

If yes, please describe: _____

Does the applicant have any allergies? Yes No

Have an EpiPen®? Yes No

If yes, please describe: _____

How did you hear about Camp Dunnabeck? _____

Has your child attended Dunnabeck before? Yes No If so, when? _____

Summer camps previously attended: _____

EDUCATIONAL HISTORY

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

Name of current school: _____ grades attended: _____

Address: _____

Does your child currently receive support services? Yes No

If yes, please describe: _____

FAMILY INFORMATION

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

Address: _____
(STREET AND NUMBER)

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

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Fax Number: _____

E-mail: _____

Occupation: _____

Post-Secondary Education and Degrees: _____

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

Address: _____
(STREET AND NUMBER)

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

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Fax Number: _____

E-mail: _____

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 you would like to live with.

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: _____