



# CAMP GARRETT SUMMER CAMP

Camp Director: **Katie Magliochetti**  
Assistant Director: **Sarah Sabatini**

Ph: 610.353.7690 | Fax: 610.356.5156  
Email: [campdirector@campgarrett.org](mailto:campdirector@campgarrett.org)

The Garrett-Williamson Foundation  
395 Bishop Hollow Road  
Newtown Square PA 19073  
[www.garrettwilliamson.org](http://www.garrettwilliamson.org)

## Getting to Know You

Camper Name: \_\_\_\_\_

Camper Age: \_\_\_\_\_ Camper Shirt Size: \_\_\_\_\_

I have attended Camp Garrett in the past Yes/No

If yes, my favorite memory of Camp Garrett is: \_\_\_\_\_  
\_\_\_\_\_

Please take some time to let us get to know you:

1. My best quality is \_\_\_\_\_
2. In my spare time I like to \_\_\_\_\_
3. My favorite food is \_\_\_\_\_
4. My favorite sport is \_\_\_\_\_  
because \_\_\_\_\_
5. My favorite school subject is \_\_\_\_\_  
because \_\_\_\_\_
6. I would like to be better at \_\_\_\_\_
7. When I grow up, I want to be \_\_\_\_\_
8. I live with \_\_\_\_\_  
I have \_\_\_\_\_ brothers and \_\_\_\_\_ sisters.

Anything else you would like us to know \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you,  
**Katie Magliochetti & Sarah Sabatini**