



DIGIVATIONS CAMP DEMIGOD INSTITUTE

Fostering Innovative Future Mentors & Thoughtful Leaders Enabling Social Change



Participant questions

These are the questions that will be asked about people being registered.

* First name
* Last name

NOTE: Our 3rd PARTY REGISTRATION SYSTEM TIME-OUTS AFTER 15 MINUTES

There is no way to save your work in this 3rd party registration system. To avoid frustration should your first attempt to complete the application fail, please phone us at 360-543-5641 or 604-628-9825 so that we can register for you manually.

* Gender ☐ Male
☐ Female

* Date of birth

* Email address

* Home phone number

* Address
Address 2
* City
* State/Province

* State/Province
* Country
* Zip/Postal code

Custom question
* Most recent school my child previously or currently attending
Please provide address and email of Head of School

Remove

Edit

Displays for all sessions

Custom question
How did you hear about Camp Demigod?
☐ Online
☐ Friend
☐ School
☐ Library
☐ Clubs/Activities
☐ Individual Teachers
☐ Print Advertising or News Article
☐ Other

Remove

Edit

Displays for all sessions

Custom question
Please describe. Referring families receive \$25 Drachmas

Remove

Edit

Displays for all sessions

Custom question
If you purchased a T-Shirt, please check which size you would like.
☐ Adult XS
☐ Adult S
☐ Adult M
☐ Adult L
☐ Adult XL

Remove

Edit

Displays for all sessions

Custom question
Camp Store Allowance (Converted to Drachmas - Play Greek Currency)
Please give any guidelines about how your child can spend his/her Drachmas. Please understand that any unspent funds will be used by DIGIVATIONS Camp Demigod for scholarships and can not be refunded or converted back to US funds for town.

Remove

Edit

Displays for all sessions

Camper's Interests

Please let us know what activities your child is most interested in.

Custom question

Please explain why your child wants to attend Camp Demigod.

Custom question

What activities and innovative, creative, athletic and discovery experiences is the camper looking forward to participating in this summer?

Camp Demigod's Innovation & Literary Camps provide memorable camper centric experiences in an engaging, active and enriching rustic environment. Let us know what your camper wants to create, make, design, learn, build, produce and accomplish socially.

Custom question

What are your child's strengths and in what areas does your child feel the greatest sense of accomplishment?

Custom question

What are the camper's three-five most favorite activities at home?

- ☐ Reading
- ☐ Movies
- ☐ Playing Outside
- ☐ Playing Computer Games
- ☐ Playing with Friends
- ☐ Being with Family
- ☐ Baking/Cooking
- ☐ Playing Music
- ☐ Designing and Building STEM Projects
- ☐ Dance
- ☐ Making Art
- ☐ Sports - team
- ☐ Sport - individual
- ☐ Roleplaying

Custom question

Tell us what fandom (s) your child enjoys.

- ☐ Percy Jackson
- ☐ Camp Jupiter
- ☐ Dr. Who
- ☐ Avatar, Last Airbender
- ☐ Steampunk
- ☐ The Hobbit
- ☐ Sherlock
- ☐ Avatar
- ☐ Hunger Games
- ☐ Inception
- ☐ Other SF
- ☐ Other Fantasy
- ☐ Other Dystopian
- ☐ Other Not Listed

Custom question

Tell us the top 5 sports & movement activities which interest your child the most.

- ☐ Theatrical Combat (Swordsmanship)
- ☐ Martial Arts (Bending)
- ☐ Capture the Flag
- ☐ Quidditch
- ☐ Fields of Mars Training (Camp Jupiter)
- ☐ Archery
- ☐ Baseball
- ☐ Soccer
- ☐ Volley Ball
- ☐ Basketball
- ☐ Football
- ☐ Wrestling
- ☐ Gymnastics
- ☐ Swimming (Boundary Bay)
- ☐ Hiking
- ☐ Running (Track & Field)
- ☐ Dance

All activities are based on minimum participants

Custom question

For our Claiming Ceremony, please list your child's top 3 choices for the Demigod or Fandom which best describes your interests and most closely describes your character. Camp Half-Blood demigods must only pick from the list of Greek and Roman gods.

- ☐ Zeus
- ☐ Poseidon
- ☐ Ares
- ☐ Athena
- ☐ Hestia
- ☐ Aphrodite
- ☐ Greek Apollo
- ☐ Artemis
- ☐ Demeter
- ☐ Dionysus
- ☐ Hades
- ☐ Hephaestus
- ☐ Hera
- ☐ Hermes
- ☐ Time Lord Cabin
- ☐ The Doctor Cabin *Inactive*
- ☐ Other Dr. Who Cabin (please list below) *Inactive*
- ☐ Avatar
- ☐ Fire Benders
- ☐ Air Benders
- ☐ Water Benders
- ☐ Earth Benders
- ☐ Steampunk
- ☐ The Hobbit
- ☐ The Hunger Games
- ☐ LEGO *Inactive*
- ☐ Roman Apollo *Inactive*
- ☐ Jupiter
- ☐ Neptune
- ☐ Pluto
- ☐ Bacchus
- ☐ Ceres
- ☐ Diana
- ☐ Juno
- ☐ Mars
- ☐ Mercury
- ☐ Minerva
- ☐ Bellona
- ☐ Venus
- ☐ Vesta
- ☐ Vulcan
- ☐ Nike/Victoria
- ☐ Hecate/Trivia
- ☐ Hypnos/Somnus
- ☐ Tyche/Fortuna

Children will be grouped in the cabins according to their gender and age.

Custom question

Please pick the top 5 subjects your child would most like to learn about at Camp Demigod.

- ☐ Ancient Civilizations (Greece, Rome, Mayan, other)
- ☐ Innovation (Ancient Greece to Commercial Space)
- ☐ Creative Writing
- ☐ Theatre: Greek Tragedy, Comedy, Literature, Acting
- ☐ Art: Costumes, Props, Masks
- ☐ Building Labyrinths, Amulets, Talismans
- ☐ Science
- ☐ Technology: Robotics, iMovie, Minecraft, scratch
- ☐ Rocketry
- ☐ Weapon building
- ☐ LEGO Serious Play
- ☐ Acting for Theatre & Cinema
- ☐ Alchemy
- ☐ Cooking
- ☐ Physics
- ☐ Biology

We will use this information to place your child in his/her classes

Displays for

Custom question

Please describe any special skills your child possesses.

Examples include costume design & creation, film making, games (board or computer) or programming languages, etc.

Displays for

Custom question

What musical instrument does your child play (or, if staff, what instrument or musicality do you have) and can they (if staff, you) bring their instrument?

We would like to organize chamber music or a student band. There is a piano on site (very out of tune) and weighted electric piano with MAC

Displays for

Custom question

Our campers are community minded, supporting their peers and participating in organizations which demonstrate future mentorship and leadership skills. Please describe how your child demonstrates such skills and organizations in which they participate.

Please describe at least one extracurricular organization or community project to which your child contributed.

Displays for

Custom question

A key goal is to ensure that campers connect with each other through shared complementary passions, interests, and capabilities. Please tell us about your noteworthy academic accomplishments, awards, and subjects in which they perform well.

In responding to this question, we are interested in academic performance in subjects encompassing science, technology, engineering, math, creative arts, humanities both in formal and external scholastic settings.

FOUNDATIONAL PARENT QUESTIONS REGARDING CAMPER'S PERSONAL HISTORY

PERSONAL CAMPER HISTORY INFORMATION WHICH GUIDES THE DIGIVATIONS Camp Demigod Leadership & Staff

Custom question

* What do you and the camper believe will be his/her greatest challenges this summer? Please be specific. (i.e. include: social/making friends, overcoming stress and anxiety, being away from family/home comforts, learning new things, disconnecting from tech).

This information is confidential to DIGIVATIONS CAMP DEMIGOD leadership and shared with staff as appropriate & used for the purposes of evaluating the camper's probability of success and staff training purposes to enable a more successful camp experience.

Custom question

* Has your child been away from home/family overnight before?

- ☐ No
☐ Yes

Custom question

If your child has attended an overnight camp in the past, please check which type of camp applies.

- ☐ Recreational Camp
☐ Academic Camp
☐ Arts or Music Camp
☐ Dance or Theatre Camp
☐ Creative Writing Camp
☐ Sports Camp
☐ Religious Camp
☐ Scouting Camp
☐ Special Needs (Diabetes)
☐ Diabetes
☐ Other

Custom question

Has your child ever experienced overnight camping in rustic environments including tent camping in forests, sleeping overnight in cabins which do not have plumbing in the cabin, sleeping on bunk beds, or other rustic camping experiences?

- ☐ yes
☐ no

Overnight lodging is in rustic accessory buildings which include separate male/female showers and bath facilities.

Custom question

Is the camper prone to missing home or being homesick? If so, what techniques have helped overcome these challenges in the past?

This information is confidential to DIGIVATIONS CAMP DEMIGOD leadership and shared with staff as appropriate & used for the purposes of evaluating the camper's probability of success and staff training purposes to enable a more successful camp experience.

Custom question

Does the camper have any sleep habits we should be aware of?

- ☐ Trouble falling asleep
☐ Bed wetting
☐ Sleep walking
☐ Sleep talking
☐ Nightmares
☐ sleeping aides (music)
☐ Other

Custom question

What coping techniques or methods are successfully used by you and him/her to address his/her sleeping challenges? Please be specific and advise if therapy or other intervention has been necessary to assist in addressing the sleeping challenges.

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific to help support Camp's Leadership ability to evaluate camper's application and likelihood of success.

Custom question

What role does your child usually play in his/her peer group?

Custom question

Do you have any concerns or advice about your child fitting in or getting along at camp?

Custom question

* Have there been any significant events (recent move, divorce/separation, illness, death, crime, injury, etc.) in the last year that may influence your son's or daughter's camp experience? Full disclosure is required to plan the most successful camp.

- ☐ No
☐ Yes
☐ If yes, please explain below.

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific regarding all issues including psychological to support Camp's Leadership ability to evaluate camper's application & likelihood of success.

Custom question

* Please describe any significant events in the last year.

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific to help support Camp's Leadership ability to evaluate camper's application and likelihood of success.

Custom question

* Has your child been under the care of a Counselor, Social Worker, Psychiatrist, Psychologist, Therapist or other mental health professional in the last year?

- ☐ No
☐ Yes
☐ If yes, please explain

Custom question

* Please explain under which circumstances that your child has been under the care of a professional

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific regarding all issues including psychological to support Camp's Leadership ability to evaluate camper's application & likelihood of success.

Untitled

Custom question

* Does your child have any behavioural, intellectual, physical, eating or other challenges? If the answer is yes, full disclosure to DIGIVATIONS Camp Demigod of the specifics are required to help plan the most successful camp experience for all campers.

- ☐ No
☐ Yes
☐ If yes, please explain

Note: 2017 DIGIVATIONS CAMP DEMIGOD CAMPER MEDICAL & HEALTH FORM addresses these issues and is to be completed with/by a physician as referenced, and transmitted to CAMP three week's prior to your child's arrival at CAMP. We require original signatures.

Custom question

Please explain any and all of your child's behavioural, intellectual, physical, eating or other challenges? Full disclosure to DIGIVATIONS Camp Demigod of the specifics are required to help plan the most successful camp experience for all campers.

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific regarding all issues including psychological to support Camp's Leadership ability to evaluate camper's application & likelihood of success.

Custom question

Please explain if there is anything else DIGIVATIONS Camp Demigod should know about your child so that she or he can have the most successful camp experience.

Custom question

* Any food allergies?

Custom question

For Faculty & Staff: do you have any allergies? (please identify any and all types of allergies including environmental and those caused by nature including trees, plants, water etc.).

Identification of any and all of Faculty & Staff allergies are mandatory and are also required on the DIGIVATIONS CAMP DEMIGOD medical forms. Please note that Camp Demigod's cabins, Tipi & Lodge are very rustic set in a beautiful mountain setting.

Custom question

Does this family member have any other health or safety concerns or information that we should be aware of that has not been reported on this form or the Camper Medical & Health Form?

- ☐ No
☐ Yes
☐ If yes, please explain below

This question is for the Children's Camp Demigod Only. Parents are responsible for themselves, their own children(s)/custodial children(s) and any and all friends health, welfare and safety at the Camp Demigod Family Fantasy and Innovation Camps.

Custom question

Please explain any and all other health or safety concerns or information that we should be aware of that has not been reported on this form or the Camper Medical & Health Form?

This information is confidential to Camp Leadership and shared with staff on an as needed basis. Please be specific regarding all issues including psychological to support Camp's Leadership ability to evaluate camper's application & likelihood of success.

Custom question

* What is the name and telephone number of your child's doctor or your family physician?

Custom question

* Please list your medical insurance company or medical services plan and phone number

Custom question

* What swimming level have you obtained or can you tell us about your comfort/skill in the water?

Beginning, Intermediate, Advanced, Lifesavings Certification. All Swimming is at your own risk.

Custom question

* Can the camper swim 25 meters unassisted?

- ☐ No
☐ Yes

Swimming Ability: To be completed by Parent/Guardian

Custom question

* Can the camper swim in deep water (water above their chest level when standing) unassisted?

- ☐ No
☐ Yes

Swimming Ability: To be Completed by Parent/Guardian

Custom question

* Does the camper usually swim with a lifejacket, PFD, or other floatation device?

- ☐ No
☐ Yes

Swimming Ability: To be completed by Parent/Guardian

Custom question

Does the camper have any experience hiking or in river sports?

- ☐ hiking in the woods
☐ hiking along trails
☐ hiking along beaches
☐ river rafting
☐ river tubing
☐ mildly rigorous outdoor activities

Custom question

International Students: Please provide your child's passport number here.

Your child's passport will remain in DIGIVATIONS CAMP DEMIGOD INSTITUTE'S possession during the student's stay at camp.

Financial Aid

Financial aid is provided by DIGIVATIONS INSTITUTE based upon a combination of factors including merit and financial need. DIGIVATIONS finance committee will review your confidential application. \$150 of your deposit is non-refundable for admin fees.

Custom question

* Please advise us if you believe your child is a candidate for financial aid or merit-based aid.

- ☐ Yes, Need-Based Award
☐ Yes, Merit-Based Award
☐ Travel Assistance
☐ No thank you

Please explain below.

Custom question

For merit-based awards: Please expand on your child's accomplishments: academic, athletic, artistic and personal unique gifts.

Custom question

Please describe any circumstances that support your request for financial aid for a need-based award (change/loss of job, care of relative, sickness, death of a spouse, etc.)

We may request complete financial documentation including the past two years of tax returns, current bank statements and assets (such as homes).

Custom question

Please list any services you are able to provide to help defray a partial cost of full tuition. Other than Medical Professionals, the maximum value recognized for in-kind services will not exceed \$300 per week.

- ☐ Carpentry (work weekends in April, May and June)
- ☐ Photography
- ☐ Cooking
- ☐ Medical Support
- ☐ Instructional Specialty
- ☐ Coaching
- ☐ Fine Art
- ☐ Arts & Crafts (based on camp themes)
- ☐ Music
- ☐ Other

All volunteers who work with children must provide three references and criminal record checks.

Custom question

Please list any in-kind donations you are willing to provide to help defray the cost of full tuition.

Previous in-kind support included food donations, materials & art supplies, costumes, medical supplies, etc.

Parent/Guardian questions

These are the questions that will be asked of the person entering the registration.

* First name

* Last name

Gender

- ☐ Male
☐ Female

* Date of birth

* Email address

Home phone number

Address

Address 2

City

State/Province

Select a state

Parent/Guardian questions

These are the questions that will be asked of the person entering the registration.

* First name

Required by ACTIVE

* Last name

 Edit

Gender

☐ Male
☐ Female

Remove

 Edit

* Date of birth



Required by ACTIVE

 Edit

* Email address

Required by ACTIVE

 Edit

Home phone number

Remove

 Edit

Address

Address 2

City

State/Province

Select a state

Country

United States

Zip/Postal code

Remove

 Edit

Business phone number

Ext.

Remove

 Edit

Cell phone number

Remove

 Edit