

1.1 Camp Director's Report Form

Camp Name: _____

Director(s) Name: _____

Camp Dates: _____

Statistics:

Number of Campers: _____

Number of Counsellors: _____

Number of Program Staff: _____

Number of Waterfront Staff: _____

Number of Kitchen Staff: _____

Number of Maintenance Staff: _____

Number of meals to guests: _____

Number of Bursary Campers: _____

of Midweek boat trips to Whitefish Falls for campers/prog.staff _____

Boat Trip Fees Collected? Yes ___ Amount _____ No ___

Camp Highlights:

Any difficulties or problems:

Suggestions for next year:

Attach Incident Report(s) if Applicable (See form in Manual)