

# HOW DID YOUR CHILD LIKE CAMP?

Age of camper \_\_\_\_\_ Gender:  Male  Female

**My child (check all that apply):**

- Was a first-time camper  Has been to an overnight non-asthma camp  
 Has been to asthma camp before  Would like to come to camp again

**How did your child seem to like camp?**

- Great  Okay  Not very much

**GENERAL**

- Was the timing of camp convenient? .....  Yes  No  
Was the length of camp appropriate? .....  Yes  No  
Was the camp facility clean and safe? .....  Yes  No  
Were registration materials clear and useful? .....  Yes  No  
Was camp check-in well organized? .....  Yes  No  
Did you participate in parent/child orientation? .....  Yes  No  
Was the overall camp schedule and activities a good fit? .....  Yes  No  
Were the entrance and exit medical interviews helpful? .....  Yes  No  
Did your child like the food at camp? .....  Yes  No  
Did your child like the camp and medical staff? .....  Yes  No  
Did the staff seem positive and well trained? .....  Yes  No  
Did camp improve your child's overall self-image? .....  Yes  No  
Would you recommend this camp to others? .....  Yes  No

Please include your comments on any of the above items: \_\_\_\_\_

**ASTHMA EDUCATION**

*Did your child learn new things about:*

- The basics about asthma and how the lungs work? .....  Yes  No  
Managing their asthma on a daily basis? .....  Yes  No  
Having an emergency asthma action plan? .....  Yes  No  
Asthma triggers and warning signs? .....  Yes  No  
How and why to use a peak flow meter? .....  Yes  No  
The difference between controllers and relievers? .....  Yes  No  
The three zones (red, yellow and green)? .....  Yes  No  
Their medications? .....  Yes  No  
Inhaler technique? .....  Yes  No  
Breathing exercises and relaxation? .....  Yes  No  
The importance of taking their medication? .....  Yes  No  
How to talk to others about their asthma? .....  Yes  No  
Controlling their asthma? .....  Yes  No  
Being active with asthma? .....  Yes  No

Please include your comments on any of the above items: \_\_\_\_\_