

# CAMP GOOD GRIEF – APPLICATION FORM

Camp Good Grief is for children who have completed K5 - fifth grade (ages 6-12).  
Please fill out form, save, attach and e-mail the application to rpearson@ppmh.org.

Child's name

Age  School

Male  Female

Parent/guardian

Address of parent/guardian

City  State  Zip

Phone (home)  Phone (work)

Name of deceased

Date of death

Relationship of deceased to the child

Person completing the form

Relationship  Daytime phone

Was the deceased cared for by Hospice  Yes  No (this question has no bearing on camp participation)

Please add additional camper information here if needed