



PARENT 2021 CAMPER SURVEY



Parent's Name: _____ Child's Name: _____

Thank you so much for allowing your child to participate in **Virtual CHAMP CAMP**! Your involvement in this survey allows us to learn more about your camper's experience, as well make improvements to future **CHAMP CAMP** programs!

	Yes	No
This was my child's first-time attending Champ Camp		
My child received the Camp in a Box		
My child watched the online videos on the Burn Foundation website		
My child was able to participate in the live Zoom events		

	Highly Disagree	Slightly Disagree	Neutral	Agree	Highly Agree
Registration was clear and easy to complete	1	2	3	4	5
I received enough communication before Virtual CHAMP CAMP	1	2	3	4	5
The length of Virtual CHAMP CAMP was appropriate.	1	2	3	4	5
The overall Virtual CHAMP CAMP schedule and activities were a good fit for my child.	1	2	3	4	5
My child enjoyed the overall Virtual CHAMP CAMP experience	1	2	3	4	5
My child enjoyed the Camp in a Box	1	2	3	4	5
My child enjoyed the online video library	1	2	3	4	5
My child enjoyed the live Zoom events	1	2	3	4	5

How would you describe your child's **Virtual CHAMP CAMP** experience?

Will you be sending your child back to **Champ Camp** next year? YES NO

Are you interested in learning more about our monthly online support group for parents and caregivers of burn survivors? YES NO

Are you interested in learning more about the Burn Foundation's Back to School program that supports new burn survivors going back to school for the first time or burn survivors who might be experiencing bullying or negative experiences at school? YES NO

Are you interested in learning more about AARBF educational scholarship programs for burn survivors and their family members? YES NO

PLEASE RETURN TO ALISA ANN RUCH BURN FOUNDATION BY **July 31st, 2021**:
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