

The Leadership Academy for Girls 2010

Brockport Auxiliary Service Corp. ♦ 350 New Campus Drive ♦ Brockport, NY 14420
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Roommate Questionnaire

This form, when completed, will help determine who your roommate will be. Please be sure to answer all the questions and return by July 1, 2010.

Name: _____ **Age:** _____ **Grade:** _____

1. Are you: Early to rise Late to bed

2. Favorite color: _____

3. Favorite subject: _____

4. Favorite sport: _____

5. Favorite movie: _____

6. Favorite food: _____

7. Favorite season: _____

8. Favorite holiday: _____

9. Favorite T.V. show: _____

10. Favorite animal: _____

11. Favorite music: _____

12. Favorite vacation spot: _____

13. How many: _____ Brothers _____ Sisters

14. Have you been away to camp before? _____

15. If you could be any animal in the world, what would you be and why?

16. What kind of career would you like and why?

Do you have a friend attending this camp? YES NO

If yes, would you like to room together? YES NO

Your friend's name: _____