



245 Broadway, Suite 107
Sheridan, Wyoming 82801
307.674.1470
www.wyosimcenter.org

2015 – DREAM BIG...Be a Nurse Camp Registration

Student Information:

Name _____ Date of birth___/___/___ Shirt/Pant Size _____
Sex M / F Grade (Fall 2015) _____ School attending: _____
Cell Phone _____ Email Address: _____

Parent/Guardian Information:

Name(s) _____
Address: _____
City _____ State _____ Zip _____
Home Phone _____ Mom Work _____ Mom Cell _____
Dad Cell _____ Dad Work _____ Other _____

E-mail address (please print clearly) _____

****Your email address is very important as most mail will be sent this way unless requested otherwise.****

Camp Registration:

Session 1: Monday, June 8th – Thursday, June 11th 8:30am-3:30pm

Session 2: Monday, July 20th – Thursday, July 23rd 8:30am-3:30pm

Calculate Total Payment: *Fees due at time of registration*

Camp Registration \$50.00

Remit Payment and Registration form to: **Sheridan College
Attn: Crissy Hunter
P.O. Box 3059
Sheridan WY 82801**

Signature of parent or legal guardian: _____ Date _____

Please note: An e-mail will be sent to you confirming your enrollment in camp. A packet containing directions, dates/times, release forms, etc. for student and parents/guardians will be mailed to you 2 weeks prior to camp starting.

****Camp is free, however participants will need to pay \$50 registration fee which will go towards college meals (3 meals/day). This registration fee is due in order to reserve your spot. Camp is valued at \$450.**

** Space is limited to 24 students each session and fills up fast.

Please get your registration form in by May 1st 2015.