



College, career, community ready

CAMP EDVENTURE 2021 - Registration Form for Students attending Bismarck Public Schools

One student per form - deadline March 18, 2021

I am registering my child for Camp Edventure.

Registration is for the 6 week session.

June 7- July 19, 2021 (NO SCHOOL July 5th)

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Grade Entering Fall 2021: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_
Parent/Guardian Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_
Address: \_\_\_\_\_
Emergency Contact Name: \_\_\_\_\_ Phone number: \_\_\_\_\_
School child currently attends: \_\_\_\_\_
School you would like your child to attend for Camp Edventure: \_\_\_\_\_

So that our staff is prepared to meet the needs of your child, please respond to the following questions:

- 1. Does your child have:
a. an IEP? Yes \_\_\_\_\_ No \_\_\_\_\_
b. a 504 plan? Yes \_\_\_\_\_ No \_\_\_\_\_
c. a Behavior Plan? Yes \_\_\_\_\_ No \_\_\_\_\_
d. a Health Care Plan? Yes \_\_\_\_\_ No \_\_\_\_\_
(this doesn't mean health insurance)
2. Medications should be given to your child at home if possible. Will your child need to receive medication during Camp Edventure (8:00 AM - Noon) check here. \_\_\_\_\_
Name of medication \_\_\_\_\_
3. Does your child currently have an Epi-pen or inhaler at school?
a. an Epi-pen? Yes \_\_\_\_\_ No \_\_\_\_\_
b. an Emergency Inhaler? Yes \_\_\_\_\_ No \_\_\_\_\_

\*\* If yes, please assure this item is at the school for Camp Ed.

Note: An email/text confirming your child's registration will be sent beginning March 1st for those registered prior to March 1st. For registrations received between March 1st and 18th, you will receive a confirmation email/text within a week of submitting your registration. If you have any questions about Camp Edventure, please call your school's principal.

Return this completed form to your child's teacher or school office. Deadline: March 18, 2021

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Bismarck Public School District does not discriminate on the basis of race, sex, color, national origin, religion, age or disability in admission or access to, or treatment or employment in, its programs and activities. To obtain this material in an alternate format, contact Matthew Guenther, Principal, at 701-323-4280 or a TTY Relay Service at 711 or 1-800-366-6888.

Table with 3 columns: FOR OFFICE USE ONLY, Initials of Recorder: \_\_\_\_\_, Date received: \_\_\_\_\_, Student ID: \_\_\_\_\_