



# Nursing Career Camp

June 24-26, 2025

## Registration Form

First & Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Gender:  Female  Male

High School and Grade Level: \_\_\_\_\_

Dietary Restrictions and/or Medical Concerns: \_\_\_\_\_

Camp Fee: \$50

Payment Info:  Check  Credit card

Card No. \_\_\_\_\_ Print Name \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVC \_\_\_\_\_

Payor's Email \_\_\_\_\_

Mail completed registration forms to  
 Events and Outreach, Anthony Hall/ MC 6705,  
 Southern Illinois University, 1265 Lincoln Drive, Carbondale, Illinois 62901

Send by Fax: 618/453-5680 OR Email: [conferenceservices@siu.edu](mailto:conferenceservices@siu.edu) OR Call: 618-536-7751

OR Register online at [conferenceservices.siu.edu/camp-youth-programs](http://conferenceservices.siu.edu/camp-youth-programs)

