



Registration Form

Camper Info

First & Last Name: _____

Home Address: _____

City, State, Zip: _____

Guardian Email: _____

Guardian Phone: _____ Secondary Phone: _____

Birth Date: _____ Grade Level (as of Fall 2025): _____

Dietary Restrictions and/or Medical Concerns: _____

Camp Payment

Camp Registration Fee \$125

Pay by Check (make payable to SIU)

Pay by credit card

Card no. _____ Exp. Date _____ CVC _____

Name on Card _____ Email _____

Registration Deadline: July 7, 2025

Return completed registration form by:

Mail: Events and Outreach, Anthony Hall/ MC 6705, Southern Illinois University Carbondale,
1265 Lincoln Drive, Carbondale, Illinois 62901

Fax: 618/453-5680

Email: conferenceservices@siu.edu

