Northwest High School Health Science Academy
Medicamp Application

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Date:	May 30 - June 1, 2023
Time:	9:00 AM – 12:00 PM
Place:	Northwest High School
Who:	students entering 6th through 9th grade for the 2023-24 SY
Cost:	$40.00

Cash, Money Order, or Online Payment (bit.ly/NWHSMediCampPay)
Receipts will be provided on the first day of camp
Fees include t-shirt, activity supplies, and snacks

What to wear: Dress in play clothes. Please follow the school dress code. Wear tennis shoes to participate in outside activities.

What to bring: A positive attitude and a willingness to learn

Activities: Camp participants will spend 3 days immersed in all things medical. Participants will spend time learning about nursing activities, how emergency medical personnel respond to events, why and what protective gear is required for medical professionals, spend time in an ambulance, and so much more.

If not completing payment/registration online, return registration form and payment by May 17, 2023 to the address below or NWHS front office:

Northwest High School MediCamp
Attn: Brandy Walker
800 Lafayette Road
Clarksville TN 37042

Refund Policy: Refunds will be honored up to 5 days prior to camp. After May 25, 2023, refunds will be given only upon receipt of a medical statement signed by a physician.

Late Registrations: Late registrations will be considered. You may reach out to Brandy Walker with the email address below. However, we cannot guarantee a student t-shirt with late registration.

For more information EMAIL:

Taylor Kane	taylor.kane@cmcss.net
Brandy Walker	brandy.walker@cmcss.net

Registration Procedure: Please complete the information below for each child attending MediCamp. If not completing online, mail this form with your cash or money order to the address indicated on the previous page or by drop off to the Northwest Front Office by May 17, 2023. We will be notified by email of any online payments.

Camper's Name_____

Age_____ **School Grade in August 2023**_____

School Attending in Fall 2023_____

Parent/Guardian

Name_____

Email _____

Emergency Phone # _____

Circle camper's t-shirt size:

Small Medium Large XL 2XL other: _____

Photography Release: We like to highlight good things that are happening in our school and community. We hope to share photos and updates about MediCamp on our two social media platforms. Additionally, we often use pictures of this nature in recruiting future students and in creation of Academy promotional materials. If you would like your child to be omitted from any posts or pictures, please indicate this in writing below your signature at the bottom of this sheet.

I give my permission for my child to attend Northwest High School Health Science Academy MediCamp and participate in all camp activities. I authorize emergency medical treatment for my child if necessary. I have read and understand the refund policy of the camp.

Signed (Parent/Guardian)_____

Date_____