







Simulations, First Aid, & More!

Ages 12-18
August 1-3, 2022
8:00a.m.-4:30p.m.
Delta College, Midland Campus
\$195 per person

INCLUDES LUNCH, T-SHIRT, & SUPPLIES



Registration and Payment







SCHOLARSHIPS AVAILABLE!

For more information contact:

STEPHANIE GESSFORD sgessford@midlandesa.org 989-631-5892 Ext: 2165













Application

Camper's Name:	Camper's Birthday://					
Camper's Home Address:						
City:	State:		Zip Code:			
Camper's Email Address:						
Camper's School:	Caı	nper's Grade	for Fall 202	22:		
Camper's T-Shirt Size (Adult Sizing): Please che	eck the box.					
\square XS \square S \square M	□L	\Box XL	□ XXI	_ [XXXL	
Check the box for the camp(s) you wish to regis	ter:					
 □ Full Tank/Automotive Camp (June 20-23 □ What's on the Menu/Farm to Table (June 20-23) □ Starting at Square One/Skilled Trades (properties of 10 July 11-15) □ July 11-15 □ July 18-21 □ Operation Innovation/Business (July 26-22) □ Scrub Life/Healthcare (August 1-3); \$195 □ Bytes/Information Technology (August 8-24) □ Find Your Future/Multiple Career Exploration 	e 28-30); \$19 bick ONE pref 28); \$195 5 -9); \$135	erred sessior	า); \$245			
Photo/Video Release: I give my permission for N child/ward for future publicity purposes related to ☐ Yes ☐ No		eartners to tal	ke pictures,	video, and	I audio of my	
Is the participant covered by health insurance? ☐ Yes; name of insurance provider and gro ☐ No	oup number: ₋					
Is the Midland County ESA authorized to approv	ve emergency	medical trea	atment? □Y	′es □No)	
Parent/Guardian's Email Address:						
Parent/Guardian's Primary Phone Number:						
Parent/Guardian's Name (printed):						
Parent/Guardian's Signature:		Date:				
Payment is due at the time of application. Plea	<mark>ase include t</mark>	he camper's	name on th	<mark>e check.</mark>		
Make check/money order payable to: Midland County ESA	Mi Att	Check may be mailed to: Midland County ESA, CTE Office Attn: Stephanie Gessford 3917 Jefferson Ave.				

Midland, MI 48640