



## Day Camp For girls ages 9-15

**How do you know if H.E.A.L.T.H. Camp is right for you?**  
H.E.A.L.T.H. Camp is for girls ages 9–15 who want to discover more about their own health and jobs in health care. If this is you, **APPLY TODAY!** 60 spots are available this year!

**When is H.E.A.L.T.H. Camp?**  
June 14-18 (ages 9 to 11 years) from 8:30 am to 12:30 pm  
June 21-25 (ages 12 to 15 years) from 8:30 am to 12:30 pm

**Where is H.E.A.L.T.H. Camp?**  
This year H.E.A.L.T.H. Camp will be offered **both in-person on the campus of Calvin University and virtually** – the choice is yours! In both formats you'll get to meet our professors and students and experience our world-class facilities.

**What is the cost to attend H.E.A.L.T.H. Camp?**  
**Free!** There is no cost associated with attending H.E.A.L.T.H. Camp this year.

# BE HEALTHY!

...and learn about your body this summer at **H.E.A.L.T.H. Camp!**  
At this free day camp **just for girls**, you'll learn about your health and explore jobs in the healthcare field—**all on the campus of Calvin University.**

- Learn about exercise in the Calvin sports complex
- Use microscopes to see human cells
- Make healthy snacks
- Do hands-on activities at the Calvin Health Services Unit
- Learn about cool jobs in the medical field, like nursing, speech therapy, occupational therapy, medicine, and social work.

**H.E.A.L.T.H.**  
Health Education And  
Leadership Training for  
a Hopeful Future



## REGISTRATION FORM

### STUDENT INFORMATION:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Student Date of Birth \_\_\_\_\_

School Name \_\_\_\_\_

Grade student will be entering in the fall \_\_\_\_\_

Which week of H.E.A.L.T.H. Camp will you be attending?

June 14-18 (ages 9 to 11 years)

June 21-25 (ages 12 to 15 years)

Is your daughter interested in a virtual option for camp?

Yes  No  Both

Shirt Size:  XS  S  M  L  XL

### PARENT/GUARDIAN INFORMATION:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Preferred Phone \_\_\_\_\_

Email \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

How did you find out about H.E.A.L.T.H. Camp?

Will you be able to bring (transport) your child to and from the camp?

Yes  No

Has your daughter attended HEALTH Camp in the past?

Yes  No

SEND REGISTRATION BY MAIL, OR EMAIL

( 616) 526-6255

[healthcamp@calvin.edu](mailto:healthcamp@calvin.edu)

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