

CAMP EDVENTURE 2025

Bismarck Private/Parochial/Home School FORM June 2nd – 27th, 2025

Children whose parents live in the Bismarck Public School District and are entering grades 1-5 for fall of 2025 are eligible to attend Camp Edventure. Each child enrolling in CampED must complete a registration form that is signed by parent or legal guardian.

Enrollment is for the full 4-week session and the registration deadline is March 28, 2025.

Student Legal Name:							Date of Birth:		
Grade Entering Fall 2025:	1	1	2	3	4	5	Gender:	Male Female	е
Race/Ethnicity:									
Address:									
Parent/Guardian Name:							Daytime Phone:		
Parent/Guardian Email:									
Emergency Contact: (If parent/guardian is unavailable)							Relationship:		
							Phone Number:		
School child currently attends:									
Has the child ever attended a Bismarck Public School? Yes No Ye							YEAR:		
School you would like your child to attend for CampED:									
Complete this section to prepare our staff to meet any learning or health needs of your child.									
Does your child have the following learning plans in place?									
Special Education IEP?	١	⁄es		N	0	504 Plan		Yes N	No
Behavior Plan?	١	⁄es		N	o	Health Ca (this doesn'	re Plan? t mean health insurance)	Yes N	No
Does your child have daily medication needs? (When possible, medications should be given a home.)									
Medication needs for CampED?		⁄es		N	0	Name of	Medication:		
Does your child need emergency medications at school? (If yes, please ensure this item is at CampED.)									
EpiPen?	Y	⁄es	1	N	o	Inhaler?		Yes N	No
Return completed registration forms to the Bismarck Public School your student will be attending for CampED. Registration Deadline: March 28, 2025 CampED registration confirmation letters will be sent in March.									
Please contact Molly Enockson, CampED Coordinator at Northridge 701-323-4210 with questions.									
Parent/Guardian Signature: Date:									
The Bismarck Public School District does not discriminate on the basis of race, sex, color, national origin, religion, age or disability in admission or access to, or treatment or employment in, its programs and activities. To obtain this material in an alternate format, contact Matthew Guenther, Principal, at 701-323-4280 or a TTY Relay Service at 711 or 1-800-366-6888.									
FOR OFFICE USE ONLY Initials	of Recorder: Date received:					Date received	d: Stude	nt ID:	