

Girls Can Do Anything - Dream Your Career

REGISTRATION FORM

Camper's Name: _____ Age: _____

Parent/Guardian Information

Please note- all registration materials/ correspondences will be mailed to address below.

Name Telephone Number

Mailing Address City Zip Code

E-mail Address (if available) Fax Number (if available)

Parent/Guardian Signature

Desired Summer Camp Date/s:

Please indicate below the session your camper will be attending.

Dream Your Career Camp(s) **AGES: 11-16**

_____ Session 1: **July 12-16, 2010** [Journalism, Museum Studies, Fashion, Culinary Arts, Modeling/Self-Esteem]
10:00 a.m. – 2:00 p.m.

_____ Session 2: **July 19-23, 2010** [Business, Law, Medicine, Environmental Science & Aerospace Engineering/Space Exploration & Technology]
10:00 a.m. – 2:00 p.m.

Please mail or fax this registration form to:
The Women's Museum: An Institute for the Future
3800 Parry Avenue
Dallas, TX 75226
Attn: **Summer Camps**
214.915.0890 – phone
214.915.0870 - fax
dpowell@thewomensmuseum.org

Registration Deadline: July 9, 2009

