

Nationals Drill Camp CADET Application ★ FAX to: 386/274-1255

June 16th-23rd, 2012 ★ College Station, Texas

Please complete application with BLACK INK and WRITE CLEARLY

PERSONAL INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_
Home Street Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Home Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Gender: Male / Female
Cadet Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_
Parent Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
Cadet Email Address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_
Parent Email Address: \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

Example: myname@yahoo.com or instructorname@mail.volusia.k12.fl.us

Additional Contact Info: \_\_\_\_\_

HIGH SCHOOL INFO

High School Name: \_\_\_\_\_
High School Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Your Instructor's Name: \_\_\_\_\_ (include Rank)
Instructor Cell Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Current Cadet Rank? \_\_\_\_\_

JROTC CAREER INFORMATION

Service Affiliation: Army Marine Corps Navy Air Force Coast Guard Unaffiliated
Including this school year, how many years have you been in JROTC? 4 3 2 1 0
Including this school year, how many years have you been on the Drill Team? 4 3 2 1 0
This school year you were a: SR JR SOPH FRESH Your interest is primarily? Armed Unarmed
Which Type of Weapon do you drill with regularly? M-1 M-1903 M-16 Lightweight Other: \_\_\_\_\_

What is the overall competition level of your drill team? \_\_\_\_\_
What is your current personal level of competition? \_\_\_\_\_
0 - No experience
1 - Color Guard but not Drill Team experience
2 - Minimal Drill Team experience
3 - Moderate competition experience (local/regional level)
4 - Extensive competition experience (National)

What is your position on the drill team? C/Cmdr CG/Cmdr Sqd Ldr Drill Team Mbr CG Mbr None Other
If other, please explain: \_\_\_\_\_

Are you a member of the color guard? Yes No Have you ever been on the Color Guard? Yes No
Has your school ever competed at the Nationals High School Drill Team Championships in Daytona Beach? Yes No
Have you ever competed at the National High School Drill Team Championships in Daytona Beach? Yes No
If yes, what years and which level? \_\_\_\_\_

Why are you coming to the Nationals Drill Camp and what do you hope to gain from your attendance?
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

Parent Day Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Parent Evening Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

List any ongoing medical conditions: \_\_\_\_\_

List any physical limitations you may have: \_\_\_\_\_

List any dietary restrictions you may have: \_\_\_\_\_

Do you currently take any prescription medications that you will need during the camp? Yes No

What are they and how often do you take them? \_\_\_\_\_

Do you have any medications you are allergic to? \_\_\_\_\_

Do you have any other allergies that may affect you during the camp? \_\_\_\_\_

## OTHER INFORMATION

Health Insurance Company: \_\_\_\_\_ Phone number: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Date of last tetanus shot (if known) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Shirt size: S M L XL XXL

How will you get to the camp? Drive Fly Bus Fly into which city?: \_\_\_\_\_

Please list the first and last names of cadets or instructors that will be attending this camp with you:

How did you learn about the Nationals Drill Camp? \_\_\_\_\_

NOTE: Please DO NOT book air travel until you ensure shuttle service is secured for your travel airport. Check the NDC Travel Page for details.

## LODGING/PACKAGE PLAN

8 Day / 7 Night Cadet Package

\$799.00 Shared dorm room at the camp (shared restroom down the hall)

Minimum deposit \$100 to hold a space. Please call if you have any questions regarding these options.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent/Guardian Signature (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Mail check to: Sports Network International, 775 Fentress Boulevard, Daytona Beach, FL 32114 or complete the form below

AMOUNT TO BE CHARGED: \$ \_\_\_\_\_ TYPE OF CARD: MC VISA AMEX DISC

CARD #: \_\_\_\_\_ VALIDATION # \_\_\_\_\_

EXP DATE: \_\_\_\_\_ NAME ON CARD: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY, STATE \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

WITH MY SIGNATURE HEREIN, I HAVE READ, UNDERSTAND AND AGREE TO THE POSTED REFUND POLICIES FOR THE NATIONALS DRILL CAMP. I HEREBY AUTHORIZE THIS CHARGE TO MY CREDIT CARD WITH MY SIGNATURE AT RIGHT. THIS TRANSACTION WILL BE PROCESSED BY CAMP HOST SPORTS NETWORK INT'L WITH THE ABOVE CREDIT CARD INFORMATION FOR THE TOTAL AMOUNT LISTED.

AUTHORIZED SIGNATURE: \_\_\_\_\_