

2017 Nationals Drill Camp CADET Application

★ FAX to: 386/274-1255 or email to drillcamp@thenationals.net ★

SUNDAY 9 JULY to SATURDAY 15 JULY
COLLEGE STATION, TEXAS – TEXAS A&M UNIVERSITY

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? _____
Your Instructor's Email: _____

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: _____

OTHER INFORMATION

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/food allergies you may have: _____

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

Do you have any medications you are allergic to? _____

Health Insurance Company: _____ Phone number: _____

Policy Number: _____ Group Number: _____

Shirt size: S M L XL XXL

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

Shuttle service will ONLY be available to/from: George Bush International in Houston (\$80 round trip) or Houston Hobby Airport (\$100 round trip)

Shuttle service to and from the College Station airport will be at no additional charge.

How did you learn about the Nationals Drill Camp? _____

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

Applicant Signature

Date

Parent/Guardian Signature (if under 18) Date

Mail check payable to: *Sports Network International at the address below or complete the credit card 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: _____

Email Address for the CC Receipt: _____

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: _____

Nationals Drill Camp – Sports Network International
★ 10 Broadcreek Circle ★ Ormond Beach, FL 32174 ★ (800) 327-9311