

ROUTE TO VICTORY BATTLEFIELD TOUR 2018 APPLICATION

INFORMATION (PLEASE PRINT CLEARLY AND INSERT YOUR NAME AS IT APPEARS OR WILL APPEAR ON YOUR PASSPORT: LAST NAME, FIRSTNAME, MIDDLE NAME)

Name:		Gender:
Date of birth:	Phone:	E-mail:
Current address:		
City:	POSTAL Code:	Citizenship:

SCHOOL INFORMATION

School Name:	Grade:
School address:	

CADET CORPS/SQUADRON INFORMATION

Corps Name:	Contact Name:	
Contact address:		
Phone:	E-mail:	Fax:
City:	Prov:	POSTAL Code:

EMERGENCY CONTACT (ADULT NOT ACCOMPANYING APPLICANT)

Name of Emergency Contact:		
Address:		Phone:
City:	Prov:	POSTAL Code:
Relationship:		

SIGNATURES

I certify that I have read and understand all the instruction concerning the Victory Battlefield Tour 2018 and agree to be bound by those provisions.	
Signature of applicant:	Date:
Signature of parent or guardian:	Date:
Signature of Cadet Corps/Squadron Commanding Officer or Designate:	Date:

The Commanding Officer or Designate is asked to submit a statement regarding the Cadet's participation in the Corps/Squadron with this application and the essay.