# APPLICATION FOR 2012 MISSION BASE STAFF & COMMUNICATIONS ACADEMY

| Applicant Name | CAP Grade | CAPID |
|---|---|---|
| | | |

| Membership Status | Gender | Age (Cadets Only) |
|---|---|---|
| ☐ Senior Member ☐ Cadet | ☐ Male ☐ Female | |

| Unit Name | Unit Charter Number |
|---|---|
| | |

| Primary/Home Phone | Alternate/Cell Phone | E-Mail Address |
|---|---|---|
| | | |

## SELECT ONLY ONE TRAINING TRACK BELOW

☐ Basic Emergency Communications

☐ Basic Mission Management ☐ Advanced Mission Management

## INDICATE TRAVEL & BILLETING INFORMATION BELOW

| Method of Travel (Contact Project Officer to determine if travel reimbursement is available and if you are eligible) | License Plate/Tail Number |
|---|---|
| ☐ Vehicle ☐ Private Aircraft (will not be reimbursed) ☐ Corp Aircraft | |

| Will You Require Overnight Billeting? | Name of Senior Member Chaperone (Cadets Only) |
|---|---|
| ☐ Yes ☐ No | |

## MEALS – SELECT ONE DISH FOR DINNER

### Dinner – Saturday 14 January 2012

☐ **Roast Beef** with au jus ☐ **Roast Chicken Breast** lightly seasoned

### Lunches – Saturday 14 January & Sunday 15 January 2012

Choices include: Club Sandwich (Ham & Turkey) and Soup (see below for sides)

**Continental breakfast** will be provided each day. **Lunch** includes: drink, beans and/or chili, chips, cole slaw, potato salad & dessert (cookies). **Dinner** includes: drink, potatoes, vegetable, dinner rolls & dessert.

***Contact the Project Officer at the e-mail address below if you have other dietary requirements!***

## RELEASE AGREEMENT

KNOW ALL MEN BY THESE PRESENTS that I am submitting my application for Civil Air Patrol Emergency Services Activities, and I hereby volunteer entirely upon my own initiative, risk, and responsibility for an assignment to participate in this activity at the first available opportunity and with full knowledge that such activity may include:

1. Traveling by land, sea, or air in US military, commercial, or privately owned vehicles from regular place or residence to the site of the activity, travel incident to the activity, and subsequent return to place of residence.
2. Participation in aeronautical activities as a passenger or student trainee in US military, commercial, or privately owned aircraft.
3. Being quartered and/or subsisting away from regular or normal place of residence for an extended period of time.
4. Remaining with the cadet group I am assigned to at all times during the activity.
5. Acting as a spokesman for Civil Air Patrol, rendering reports on the activity.
6. Refraining from argumentative discussions concerning governmental policies.

In consideration of the permission extended to me by the Civil Air Patrol/United States of America through its officers and agents to participate in said activity or activities, I do hereby for myself, my heirs, executors, and administrators release and forever discharge the Civil Air Patrol, Inc./United States of America, and all its officers, agents, and employees acting official or otherwise, from any and all claims, demands, actions, or causes of action, on account of my death or on account of any injury to me or my property which may occur as a result of the negligence of the Civil Air Patrol/United States of America, its agents or employees during said activity or activities or continuances thereof, as well as all ground and flight operations incident thereto.

Date _____ Applicant's Signature (e-Signature acceptable) _____

## UNIT CERTIFICATION

I certify that the above information is correct, that all requirements for attendance will be completed by the required dates, that the individual is a member in good standing and is authorized to participate in the activity.

Date _____ Unit Commander's (or Designee's) Signature (e-Signature acceptable) _____

Cost for the weekend is $45. **If you pay before 10 January**, you will receive a $10 discount (total price $35). Mail completed applications, including check/money order or unit funds transfer made out to Civil Air Patrol to the address below:

***Be sure to contact the Project Officer if you have any special dietary or disabled access requirements!***

WIWG ES Staff
CAP Hangar
9393 W. Appleton Ave.
Milwaukee, WI 53225

Or e-mail to:
projectofficer@wiwg.cap.gov
and send payment via post to the address to the left
Unit Funds transfers may be made to WI-002

ES Academy