



## 2018 KIDS SEA CAMP, INC. FAMILY APPLICATION

Please list all adults and kids, one application per family.

### Dear Parents,

Please complete the following application so we can get to know you and your children better before Kids Sea Camp program begins. **This form must be completed in full and submitted with the Terms & Conditions form and your deposit of \$1,000 per room unless otherwise stated by KSC in order to confirm your KSC reservations.** All forms are located on [www.familydivers.com](http://www.familydivers.com) reservations page.

**Please circle if any discounts may apply, ID is required for military and PADI Pro:** Military/ Early booking / Travel Agent / Dive Shop/ Firefighter/

PADI Pro# \_\_\_\_\_ Level \_\_\_\_\_

### TRIP INFORMATION

**Arrival Date:** \_\_\_/\_\_\_/\_\_\_ **Destination:** \_\_\_\_\_ **Departure Date:** \_\_\_/\_\_\_/\_\_\_

Years attending KSC \_\_\_\_\_ Do all participants speak English?(Y/N) If not what language? \_\_\_\_\_

Number of bedrooms requested \_\_\_\_\_ Room Type Requested \_\_\_\_\_ Extra nights (Y/N)

**Main contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address, not a P.O Box:** \_\_\_\_\_

### ADULT INFORMATION

Please list all **adults over the age of 17** traveling in adult section below:

#### Adult 1

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N) BC (Y/N) Regulator (Y/N) Computer (Y/N) Wet suit size: \_\_\_\_\_ Nitrox (Y/N) Parent (Y/N)

#### Adult 2

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N) BC (Y/N) Regulator (Y/N) Computer (Y/N) Wet suit size: \_\_\_\_\_ Nitrox (Y/N) Parent (Y/N)

#### Adult 3

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N) BC (Y/N) Regulator (Y/N) Computer (Y/N) Wet suit size: \_\_\_\_\_ Nitrox (Y/N) Parent (Y/N)

#### Adult 4

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N) BC (Y/N) Regulator (Y/N) Computer (Y/N) Wet suit size: \_\_\_\_\_ Nitrox (Y/N) Parent (Y/N)

### GUARDIAN INFORMATION (Only if attending child is not traveling with parent)

**Guardian 1** Full Name: \_\_\_\_\_ Relationship \_\_\_\_\_

**Guardian 2** Full Name: \_\_\_\_\_ Relationship \_\_\_\_\_

## Child's Information

Please circle the PADI program your child is enrolling in.

Please provide the age of the participant at the time of the camp.

**CLASS INFORMATION:** SASY ages 5-7, Seal Team ages 8-10, Learn to dive Junior Open Water (JOW) ages 10 to 14, Learn to dive Open Water (OW) ages 15+, Adventure diver ages 10 and up, (AOW) Advance Open Water ages 12+17, Nitrox ages 12 to 17 **(All children must be of proper age at the time of the camp)**

### Child 1: (Circle class choice here)

(SASY) (Seal Team) (JOW) (OW) (Adventure diver) (AOW) (Nitrox)

Other PADI Specialty course request? \_\_\_\_\_

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N), BC (Y/N), Regulator (Y/N), Computer (Y/N), Wet suit size: \_\_\_\_\_ Nitrox (Y/N)

**Special requests for your child:** \_\_\_\_\_

### Child 2: (Circle class choice here)

(SASY) (Seal Team) (JOW) (OW) (Adventure diver) (AOW) (Nitrox)

Other PADI Specialty course request? \_\_\_\_\_

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N), BC (Y/N), Regulator (Y/N), Computer (Y/N), Wet suit size: \_\_\_\_\_ Nitrox (Y/N)

**Special requests for your child:** \_\_\_\_\_

### Child 3: (Circle class choice here)

(SASY) (Seal Team) (JOW) (OW) (Adventure diver) (AOW) (Nitrox)

Other PADI Specialty course request? \_\_\_\_\_

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N), BC (Y/N), Regulator (Y/N), Computer (Y/N), Wet suit size: \_\_\_\_\_ Nitrox (Y/N)

**Special requests for your child:** \_\_\_\_\_

### Child 4: (Circle class choice here)

(SASY) (Seal Team) (JOW) (OW) (Adventure diver) (AOW) (Nitrox)

Other PADI Specialty course request? \_\_\_\_\_

First name: \_\_\_\_\_ Last name: \_\_\_\_\_ Diver(Y/N) Sex: M or F

Birth Date: \_\_\_/\_\_\_/\_\_\_ Certification# & Agency \_\_\_\_\_ Date of last dive: \_\_\_/\_\_\_/\_\_\_

Passport#: \_\_\_\_\_ Exp: \_\_\_/\_\_\_/\_\_\_ T-shirt size: \_\_\_\_\_ Need rental gear?(Y/N) Fins-size: \_\_\_\_\_

Mask (Y/N), BC (Y/N), Regulator (Y/N), Computer (Y/N), Wet suit size: \_\_\_\_\_ Nitrox (Y/N)

**Special requests for your child:** \_\_\_\_\_

## Medical Information

Does your child have any medical conditions, Special needs, **THIS INFORMATION MUST BE PROVIDED.** If your child is taking medication or has any special conditions, you must have a completed medical form filled out and doctors note stating your child can participate. Kids Sea Camp wishes to provide each child with a fun and safe program with properly qualified staff. Not providing this information can result in a child being removed from their program. Do not leave this blank, if no, then state no, initial and date. If there will be any operation, illness or medical condition within 6 months of your travel date, please bring a doctors approval to dive.

Initial / \_\_\_\_ / \_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list any allergies or medications that child is taking, also any foods to avoid:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other comments or information, special day, birthdays or celebrations:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Email, mail or fax completed form to: [kids@familydivers.com](mailto:kids@familydivers.com)  
or mail to Kids Sea Camp Inc, P.O. Box 291030 • Columbia, SC 29229  
803.419.2556 • Fax 843.353.2537