



# No.19 (Auckland) Squadron Air Training Corps, NZ Cadet Forces

PO Box 121-085 Henderson Auckland  
www.19squadron.org.nz Email: info@19squadron.org.nz

Patron: Rt Hon Helen Clark, MP



## CADET ENROLMENT FORM

### Part 1: Cadet Details

To be completed by applicant in block letters

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Full Residential Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Home: \_\_\_\_\_ Phone Mobile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name of Your School: \_\_\_\_\_

Occupation: \_\_\_\_\_

Religion: \_\_\_\_\_

List any sports you play: \_\_\_\_\_  
\_\_\_\_\_

List any Hobbies: \_\_\_\_\_ Swimmer:

Are you currently, or have you been a member of another cadet unit? Yes/No (delete as applicable)  
Unit Name: \_\_\_\_\_

Dates: \_\_\_\_\_ Rank Attained: \_\_\_\_\_

Are you a member of any other youth organisations? Yes/No (delete as applicable)  
Details: \_\_\_\_\_  
\_\_\_\_\_

**Part 2: Next Of Kin**

*To be completed by applicant in block letters*

**Surname:**

---

**First Name:**

---

**Relationship:**

---

**Full**

**Residential**

**Address:**

---

---

---

---

**Phone Home:**

---

**Phone Mobile:**

---

**Phone Work:**

---

**Occupation:**

---

**E-Mail:**

---

**Part 3: Alternative Contact**

*To be used in an emergency when Next of Kin cannot be contacted.  
Someone not living in the same household.*

**Surname:**

---

**First Name:**

---

**Relationship:**

---

**Full**

**Residential**

**Address:**

---

---

---

---

**Phone Home:**

---

**Phone Mobile:**

---

**Phone Work:**

---

**Part 4: Medical Details**

*To be completed by applicant in block letters*

**Doctors Name:**

---

**Doctors Phone:**

---

**Name and  
Address of  
Medical Practice:**

---

---

---

---

**List any Medical  
Conditions or  
Physical Disability.  
e.g. asthma, dyslexia,  
allergies etc.**

---

---

---

---

---

---

---

---

**Give details of how to  
treat any attacks,  
reactions etc.**

---

---

---

---

---

---

---

---

**Give details of any  
medication you are  
taken and any to.**

---

---

---

---

---

---

---

---

**Part 5: Declaration** *To be completed by Parent or Guardian*

I here by certify that to the best of my knowledge the statements made on this application form are true and correct and that he/she has my full consent to join a cadet unit of the New Zealand Cadet Forces and take part in approved recognised activities undertaken by that cadet unit.

I consent to my son/daughter/ward being subject to the New Zealand Cadet Forces Code of conduct and any penalties, sanctions, or restrictions imposed under its provisions. I also understand that where serious disciplinary matters are concerned the Cadet Unit Commander will discuss the matters with me.

I accept that there will be an obligation on my son/daughter/ward to observe and obey the rules, customs and requirements of the cadet unit and New Zealand Cadet Forces.

I accept full responsibility for any uniform and other Unit equipment issued on loan to my son/daughter/ward and undertake to ensure that it is returned in good order (fair wear and tear accepted) or make good any deficiencies immediately he/she ceases to be a member of the New Cadet Forces.

---

Signature of Parent/Guardian

---

Full Name of Parent /Guardian (Block letters)

---

Date

**PERSONAL INFORMATION STATEMENT**

The information given in this application form will be retained and used by the cadet unit for the purposes medication allergic of personnel management. The information will remain the property of the cadet unit for as long as you remain a member of the New Zealand Cadet Forces.

The information will be held securely and access to the information will be restricted to the staff of the cadet unit and the Regular Force members of the New Zealand Cadet Forces. The information will not be disclosed for any purposes relating to your membership of the New Zealand Cadet Forces.

You may request access to, and the correction of, any information that is held by the cadet unit about yourself at any time.