



Cool Kids Vacation Condo Application

To be completed by a Parent/Guardian:

Child's Full Name: _____

Date of Birth: _____ Age: _____ Gender: M F

Home Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian #1 Name: _____

Phone #: _____ Email: _____

Parent/Guardian #2 Name: _____

Phone #: _____ Email: _____

Note: If the child is under the custody of only one parent or guardian, please attach a copy of the child custody agreement. Otherwise, both parents/guardians must sign this document.

Name of hospital where child is/was treated: _____

Please list the full names and ages of all persons who will be staying at the property. Please note, only family members who reside with the patient are eligible. **Maximum occupancy is 6. No pets allowed and smoking is prohibited.**

- 1) Name _____ DOB _____ Relationship _____
- 2) Name _____ DOB _____ Relationship _____
- 3) Name _____ DOB _____ Relationship _____
- 4) Name _____ DOB _____ Relationship _____
- 5) Name _____ DOB _____ Relationship _____
- 6) Name _____ DOB _____ Relationship _____

Select preferred vacation condo location:

Lewes, DE

Myrtle Beach, SC

Choice of Dates:

Saturday to Saturday – Check in 4:00pm, Check out 10:00am

Please provide us with your choices of vacation week:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Dates are subject to first come, first served based on family eligibility.

We cannot confirm your dates until the application process is complete and has been approved.

I/we understand and recognize that participation at the Cool Kids Campaign vacation condo is contingent upon approval by the Cool Kids Campaign Foundation as well as compliance with all conditions, qualifications and restrictions designated by the Cool Kids Campaign Foundation, Inc. By signing below, I verify that my child has been cleared by his/her medical team to travel and stay in the Cool Kids Campaign vacation condo.

Once your application is approved, you will receive the final two documents (Property Agreement and Liability & Photo Release). To confirm your reservation, these documents are to be completed and returned within two weeks of receipt.

Parent/Guardian #1 : _____ Date: _____

Parent/Guardian #2: _____ Date: _____

Any additional comments:

Once this application is complete, please submit via email to the following:

Lewes, DE condo: jen@coolkidscampaign.org

Myrtle Beach, SC condo: jenniferg@coolkidscampaign.org