Officers:

President: Syrena VanEaton Vice President: Allison Stephens

Secretary: Cristy Holloway/

Janice Weddle

Treasurer: Natasha Cryer



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## **CIVIL WAR HERITAGE FESTIVAL**

April 24<sup>th</sup> – 26<sup>th</sup>, 2020

## **Unit & Individual Reenactor Pre-Registration Form**

Contact Name: _								
Rank:		Email:						
Address: _								
Telephone: _		Name of Unit:						
Unit Website:								
Unit Contact (title/rank): Type of Impression (tent/				Email:				
Type of Impression (tent/Galvanize? Y/N	campaign):			US	SA CS/	Α		
Galvailize: 1/10		Туре о	f Hnit.					
Infantar	A retilla m. r			1 odical	Civilian	Othor		
Infantry	Artillery	Cavairy		riedicai	Civilian	Other		
# Soldiers	# Civilia	ns# Ch	ildren age	12 & under	TOTAL: _			
TOTAL	# OF MEMBE	ERS IN GROUP,	INCLUDIN	G FAMILY:				
# Tents: Dog/Shelt	er	_ Wedge/A		_ Fly	Officer	Otl	her	
# Mounted Officer	s	_ # Artillery Pie	eces	# Mounted	Cavalry			
Military Specialty:								
Civilian Impression:								
Does your unit carry its o	wn insurance	e? Y/N;	if so, what	type:				
What national/regional o	rganization a	ire you or your	unit affilia	ted with?: _				
Do you or your unit have	any special r	ieeds? PLEASE	specify in	detail here a	and call to disc	cuss:		
	Email comp	oleted form to:	mcwra18	62@gmail.c	om			
Please read 8	₹ sign below	indicating you	understan	d & agree w	ith the follow	ing:		
By signing this registra	_			_		_	,"	
Hartville Area Chamber o				•				
	or	loss or damage	s to my pr	operty.				
Signature			_	 Da				
Jigiiatuic				Da	ILC			