

RE-ENACTOR REGISTRATION FORM

A Civil War Battle Re-Enactment & Living History Event

Host: Cornwell's Turkeyville USA

City: Marshall, MI

Dates: June 17-18, 2017

Registration is FREE

Mail Registration: Civil War C/O Turkeyville 18935 15 1/2 Mile Rd, Marshall, MI 49068

Email Registration: patti@turkeyville.com

Web Registration: www.turkeyville.com

Name of Unit: _____ USA _____ CSA _____

Type of Unit: Infantry: _____ Artillery: _____ # Artillery Pieces: _____

Cavalry / Horses _____ Must have proof of Coggins at registration check in.

Tents: _____ Dog/Shelter _____ Wedge /A _____ Fly _____ Wall _____

Civilians: _____ # Minors under 12: _____ Total: _____

Special Impressions: _____

Type of Impressions: Military: _____ Civilian: _____

Contact Person: _____ Title: _____

Mailing Address: _____

Phone: _____ Email: _____

Attach ROSTER to back of this form or attach word document if emailed. Clearly Print all Participants Names, Identify as: Civilians, Minors or by Military Rank.