

“After the Battle: Fredericksburg”
November 14-16, 2008
Military Re-enactor Registration Form

Instructions

Print and fill out BOTH pages of this registration form. All registrations are to be done individually, although unit commanders may collect the forms and send them in with one check covering the registration fee. Nevertheless, each member must still fill out and sign the forms individually. **A SEPARATE SIGNED REGISTRATION AND WAIVER FORM SHALL BE SUBMITTED FOR EACH INDIVIDUAL REGISTRANT.**

Registrations sent in without a fee will be rejected. We will be posting a roster of those who have registered for the event on a regular basis from the time the first registration are received until the registration deadline, so check back frequently to make sure yours was received. **Registrations must be postmarked by September 27, 2008.**

Name: _____

Age (if under 18) _____ (If Under 18) Parent/ Individual Responsible at Event

Your Street Address: _____

City _____ State _____ Zip Code: _____

Phone (evening) (_____) _____ Phone (day) (_____) _____

E-mail: _____

Participant Information: (Check One): US _____ CS _____

Unit/Mss Name: _____

IMPORTANT: If you are a certified EMT or have lifesaving/first aid training and would be willing to help our medical staff at this event, please check this space and our medical coordinator will contact you prior to the event. _____

Please Indicate Whether you Have Available for This Event:

Equipment Item	Check if Yes	Equipment Item	Check if Yes
EXTRA US Enlisted Frock Coat: (as possible loaner or as “prop” for the event)		EXTRA Eastern Confederate Infantry Kit (as possible loaner or as “prop” for the event)	
EXTRA US Overcoat		Canvas Fly	
		Ax and/or Splitting Wedge	

Registration Fees: The registration fee is **\$10.00 per person**. Underage re-enactors must be registered by a parent or guardian who must sign the release form on their behalf.

Checks should be made out to **“Co. D, 27th Virginia”** and sent to:

**Mike “Dusty” Chapman
5734 North 15th Street
Arlington, Virginia 22205**

LIABILITY RELEASE AND AGREEMENT TO ABIDE BY THE “AFTER THE BATTLE” STANDARDS:

I, the undersigned, understand that I will be participating in a potentially dangerous activity on November 14-16, 2008 (“After the Battle: Fredericksburg” (ATB)), with the use of firearms and the recreational use of the CWPT Slaughter Pen property near Fredericksburg, VA for outdoor activities. As a condition to, and in consideration for receiving permission to participate, I hereby agree and promise to assume risk and responsibility for any and all injuries, or damages due to injuries, suffered by me or caused by third parties to me, arising out of participation in the aforementioned activities. I hereby release, indemnify, forever discharge, and hold harmless, members and guests of the Columbia Rifles, Stonewall Brigade, and the Civil War Preservation Trust and the event’s participating organizations from any and all responsibility, liability, claims for personal injury, legal actions or suits, damages, or losses of any kind or description, both at law or in equity, arising out of, or in any way connected with, any of the above-mentioned activities. I have read and will comply with the ATB standards. I understand there may be an inspection on the first day of the event or at any time thereafter. I understand that I will respect and honor the orders of officers and non-commissioned officers appointed over me. If I have misrepresented my portrayal I may be asked to leave the event.

_____ (signature)

_____ (print your name)

_____ (signature of parent or guardian if under age 18)

_____ (date)

Medical information: This information will be your event pass. We will distribute at the event. [Return this form with your registration.](#)

Person to contact in case of emergency: _____

Contact phone number(s): _____,

Do you have medication with you? Yes _____ No _____

Allergies, medications, conditions for primary care providers:
