

**REGISTRATION FORM:
BATTLE SHELburne CROSSROADS, 2016**

Unit Name: _____

Affiliation: ()U.S. ()U.S. Civilian ()C.S. ()Civilian ()Other _____

Contact Person: _____

Address: _____

City: _____ State/ Province: _____ Zip Code: _____

Phone Number: _____

Email Address: _____

Number of Unit Participants:

Infantry: _____ Artillery: _____ Cavalry (mounted): _____ Cavalry (dismounted): _____

Civilian: _____ Sutler: _____

Please send your registration (including payment) by May 1, 2016. **IF YOU ARE NOT PRE-REGISTERED A WALK-ON FEE WILL BE ADDED FOR YOUR REGISTRATION.** After May 1 you will be considered a walk-on and pay a \$7.00 registration fee. Children under 12 are free.

Number of Participants: _____ x \$5.00 US (pre-registered) fee = _____

Sutler Registration Fee: _____ \$15.00 US = _____

(\$10.00 vendor fee + \$5.00 one participant registration fee)

As my unit's commander or unit's leader, I UNDERSTAND and have informed the members of my unit of all rules and regulations concerning the weekend event. The standard rules of camp and field are in effect.

SIGNATURE: _____ DATE: _____

Walk-ons from registered units are permitted as long as they agree to the rules as endorsed by this sponsor and host. The fee will be \$7.00 as a late registrant. Individual walk-ons will be allowed as long as they follow the safety rules as stated. Any violation of the rules of safety in camp or on the field and the individual will be asked to leave immediately. In this case there will be no refunds given.

Mail Registration Materials and payment to:
Jim Buell, CVHRI
223 Stokes Lane, Shelburne, VT 05482
NOTE: Checks are to be made payable to: CVHRI

Please list each participant's name and rank here:

RANK

NAME

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

Cavalry units: Please note that you must provide Coggins and rabies paperwork for your animal. Hay will be provided but you will have to BYO Grain.

Mail Registration Materials and payment to:
Jim Buell, CVHRI
223 Stokes Lane, Shelburne, VT 05482
NOTE: Checks are to be made payable to: CVHRI