



# Gettysburg 155<sup>th</sup> Anniversary

## July 5<sup>th</sup> - 8<sup>th</sup>, 2018

### – Reenactor Registration Form –

Please fill this form out as completely as possible and list everyone on the attached sheet (Use additional sheets as needed.) **The first six lines on this form must be completed for registration to be accepted.** Return all forms and fees to: Gettysburg Anniversary Committee, P.O. Box 3482, Gettysburg, PA 17325-3482.

**Unit or Regiment** \_\_\_\_\_

**Unit Contact Person** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Mailing address** \_\_\_\_\_

**City, State and Zip** \_\_\_\_\_

**Phone** (incl. area code) **Day** ( ) \_\_\_\_\_ **Evening** ( ) \_\_\_\_\_

**Organization Affiliation** (e.g. ANV, GAR, LC MG, NR, USV, WB, etc.) \_\_\_\_\_ **Branch of Service** \_\_\_\_\_  
**(It is very important to list Organization Affiliation for planning and Divisional assignments. Non Affiliated will be assigned to a Provisional Brigade)**

#### LIST THE NUMBER OF PARTICIPANTS BY CATEGORY

INFANTRY: (U.S.) \_\_\_\_\_, (C.S.) \_\_\_\_\_,

CAVALRY: (U.S. Mounted) \_\_\_\_\_, Number of Horses \_\_\_\_\_, (U.S. Dismounted) \_\_\_\_\_

(C.S. Mounted) \_\_\_\_\_, Number of Horses \_\_\_\_\_, (C.S. Dismounted) \_\_\_\_\_

ARTILLERY (U.S.) \_\_\_\_\_, (Number of Guns) \_\_\_\_\_, (Type of Guns) \_\_\_\_\_

(C.S.) \_\_\_\_\_, (Number of Guns) \_\_\_\_\_, (Type of Guns) \_\_\_\_\_

#### AUTHENTIC DEPENDANTS:

(Camping in U.S. Military Camp) \_\_\_\_\_

(Camping in C.S. Military Camp) \_\_\_\_\_

(Camping in U.S. Dependant Camp) \_\_\_\_\_ **(Must be affiliated with a Military Unit)**

\*Living History/Other \_\_\_\_\_ **(must be pre-approved)**

\*Specify Impression and who with: \_\_\_\_\_

Registration fees are: \$15 for individuals if registered by October 31<sup>st</sup>, 2017; \$20 from November 1<sup>st</sup> -January 31<sup>st</sup>, 2018; \$25 from February 1<sup>st</sup> - April 30<sup>th</sup>, 2018; \$35 from May 1<sup>st</sup> - June 1<sup>st</sup>. Registration Ends June 1, 2018. No Substitutions after June 1<sup>st</sup>.

Totals: Military # \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Military Dependant # \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Living History # \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Under 12 # \_\_\_\_\_ (children under 12 are free but must be registered.)

Total Amount enclosed \$ \_\_\_\_\_



# Company Muster Roll



All participants, by registering for and attending this event agree that any sponsoring organization, person, unit, or agents or employees thereof will not be held liable or responsible for loss, damage, or injury to persons or property during this event.

**Please:** Type or Print names legibly. Registration will be by name. Confusion has arisen in the past because we couldn't decipher the names on this sheet. Please list complete address, including zip code. Thank you.

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

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**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**Rank** \_\_\_\_\_ **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

**-No On-Site Substitutions will be Allowed-**

**Return all forms and fees to: Gettysburg Anniversary Committee, P.O. Box 3482, Gettysburg, PA 17325-3482.  
Questions – Contact GAC at 717-338-1525**