

150th Anniversary of the Peninsula Campaign
REENACTMENT REGISTRATION
April 21-22, 2012

Please Mark: U. S. or C. S.

Unit and Contact Information

Unit Name: _____ Unit Affiliation: _____

Commander Name and Rank: _____

Contact Name and Address: _____

City _____ State _____ Zip _____

Phone _____ Email _____

Number of Participants by Category

- Infantry _____
- Dismounted Cavalry _____
- Mounted Cavalry* _____
Number of Horses _____
- Artillery* _____
Number and Type of Pieces _____
- Other portrayals _____

Notes:

All military reenactors must either fall in with their regular unit or have prearranged with a unit attending to fall in with them due to safety concerns.

❖ * Artillery and Mounted Cavalry will be admitted for free to help defray some of the costs of horses and guns. (Must be preregistered for planning purposes.) Dismounted cavalry must pay the regular registration fee.

❖ The first 2 Pre-registered artillery pieces per side receive a bounty. (\$125 for field pieces and \$75 for mountain howitzers or rifles) To receive this, you must be set up in the City of Newport News' vendor file and submit an invoice.

Fee and Registration Information

- ❖ Adult: \$5.00 before April 6th / \$10 after
- ❖ Children 11 and under free
- ❖ Please make checks payable to Endview Plantation

**If paying by Check please mail registration to:
Endview Plantation • 362 Yorktown Rd. • Newport News, VA 23603
If you are paying by Credit Card you can also e-mail
your registration to tgreene@nngov.com**

oster of participants on following page. Thanks, and we will see you there!

ENDVIEW REENACTMENT REGISTRATION (page 2)

Roster of Participants

Please *print* unit name: _____

Name	Age 11 and Under?	Rank/Civ.
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

Fee Totals

Number of Participants	Fee	Subtotal
_____ Adult Participants* @	\$5*/\$10* each =	\$_____
_____ Adult Participants @ (Art/ Mounted Cav)	No charge	\$ 0
_____ Children age 11 and under	No charge	\$ 0
_____ TOTAL # of Participants		\$_____ TOTAL Fees

Note:

- ❖ Please print and attach additional pages if necessary if group exceeds 20 people.
- ❖ One check can be written for all fees.

*Adult: \$5.00 before April 6th / \$10 after

Payment: Payment is by check, cash or credit card. **Please indicate:**

CHECK

CREDIT CARD

Amount: \$_____

- For check, please make payable to *The Civil War at Endview* and staple to this form.
- For credit card, please complete the following information:

Cardholder name (print): _____

Credit card type (Mark one): VISA MASTERCARD

** A transaction receipt will be included with your confirmation letter.*

Complete card number: _____ - _____ - _____ - _____ Exp. Date: ____/____

Cardholder signature: _____

(*Remember if you are paying by credit card you can both print and mail this form or e-mail it to tgreene@nngov.com to expedite your registration.)