



Ataque Británico y Defensa de San Juan, Puerto Rico 1797
British Siege and Defense of San Juan, Puerto Rico 1797
 Hoja de inscripción - *Registration Form*
 25 día de llegada – *arrival day, 26, 27, 28 | abril - April 2024*

I

Nombre (<i>Name</i>)		Apellidos (<i>Last name</i>)	
Correo electrónico (<i>Email</i>)		Teléfonos (<i>Phones</i>):	

II

Dirección Residencial (<i>Home Address</i>):			
País (<i>Country</i>)	Estado (<i>State</i>)	Ciudad (<i>City</i>)	Código Postal (<i>Zip code</i>)

Marque si la dirección de correo es igual. (Check if mail address is the same)

Dirección de correo (<i>Mail address</i>)			
País (<i>Country</i>)	Estado (<i>State</i>)	Ciudad (<i>City</i>)	Código Postal (<i>Zip code</i>)

III

Fecha y hora de llegada planeada Planned date and time of arrival	Núm. vuelo aerolínea (si disponible) Airline flight number (if available)	Fecha y hora de salida planeada Planned date and time of departure

IV. Estadía (*Accommodation*): Castillo San Cristóbal Otro: _____

V. Días que participaré en la recreación (*Days I will participate in the event*) “**X**”

Jueves (noche) <input type="checkbox"/> <i>Thursday evening</i>	Viernes (noche) <input type="checkbox"/> <i>Friday evening</i>	Sábado <input type="checkbox"/> <i>Saturday</i>	Domingo <input type="checkbox"/> <i>Sunday</i>
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Todo participante que se aloje en el Castillo San Cristóbal, acuerda participar en todas las actividades programadas. *All participants staying at Castillo San Cristóbal, agree to participate in every activity scheduled.*

VI. Estaré participando en la recreación como (*I will be reenacting as*): “**X**”

<input type="checkbox"/>	Regimiento Fijo PR	<input type="checkbox"/>	Infantry	<input type="checkbox"/>	Artillery
<input type="checkbox"/>	Milicias Disciplinadas	<input type="checkbox"/>	Sutler	<input type="checkbox"/>	Cavalry
<input type="checkbox"/>	British	<input type="checkbox"/>	Artisan/Craftman	<input type="checkbox"/>	Seaman
<input type="checkbox"/>	French	<input type="checkbox"/>	Musician	<input type="checkbox"/>	Sailor
<input type="checkbox"/>	German	<input type="checkbox"/>	Civilian	<input type="checkbox"/>	Other: explain



VII. ¿Usted trae su fusil? *Are you bringing a musket?* Sí *yes* No
Serial ID Number: _____

VIII. En caso de emergencia, por favor provea el nombre y teléfono de la persona con quién usted desea que nos comuniquemos. *In case of an emergency, please provide the name and phone number of the person you would want us to contact.*

IX. Si usted tiene alguna necesidad especial que entiende que debemos atender, por favor, indíquelo a continuación para ayudarle a tener una estadía cómoda. *If you have any special needs, you believe we should address, please indicate below to help you have a comfortable stay.*

X. Los participantes no miembros bona fide del Regimiento Fijo de Puerto Rico, contribuirán \$30.00 para sufragar costos del evento. Todo recreador que participe como fusilero o artillero contribuirá con \$20.00 adicionales para cubrir los costos de la pólvora. Esta aportación debe ser enviada a la dirección postal del encabezamiento de este formulario. El Regimiento Fijo de Puerto Rico se reserva el derecho de admisión al evento. *Non-member participants of the Regimiento Fijo de Puerto Rico will contribute \$30.00 to cover costs of the event. All reenactors participating as fusilier or artillerymen will contribute an additional \$20.00 to cover black powder cost. This contribution should be sent to the address in the header of this form. The Regimiento Fijo de Puerto Rico, Inc. reserves the right of admission to this event.*

XI. La información solicitada aquí será utilizada por el Regimiento Fijo de Puerto Rico para procesar su registro al evento. *The information herein requested will be used by the event coordinators and organizers of the Regimiento Fijo de Puerto Rico to process your registration to the event.*

Upon completion of the registration form, please remit copy to the following email address: **regimientofijodepuertorico@gmail.com**, or mail to:

Regimiento Fijo de Puerto Rico, Inc.
307 Calle de la Luna
San Juan, Puerto Rico 00901

Firma (Signature): _____ Fecha (date) _____

If sent by email check this box to accept the above-mentioned information.



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2024 EVENT RELEASE OF LIABILITY FORM

As participant in the 1797 British Attack and Defense of San Juan, Puerto Rico organized by the Regimiento Fijo de Puerto Rico Inc. (hereafter The Fijo) to enter and participate in any military, historical reenactment or activity held by The Fijo, I the undersigned hereby release The Fijo, its agents, volunteers, officers and any and all subordinate or affiliated, organizations, sponsors, hosting or associate with such Fijo activity, of and from any liability, claims, demands, actions and causes of action whatsoever arising out or related to any loss, damage or injury including death, that may be sustained by me or my property while I am participating in The Fijo activity or reenactment.

I am duly aware of its risk and hazards inherent upon participating in such activity, and or in route to or from the same and in participating in any activity during the reenactment. I hereby voluntary elect to participate in such reenactment and activities. I assume all risk, loss, damage or injury including death which may be sustained by me or property while upon in route or from the same. This release shall be binding upon my distributees, heirs, next of kin, executors and administrators.

In signing the foregoing, I hereby acknowledge that I have read this release, understand it and sign it voluntary. I am sound mind, not a minor and over the age of majority.

If a parent of a minor child who is participating (<18), I hereby sign on his/her behalf.

Print name: _____

Date: _____

If sent by email check this box to accept the above-mentioned information.

Signed: _____