

# REGISTRATION FORM FOR 2019 SUMMER EVENT

## Saturday June 29, 2019

Family Fun Night at the Columbia Fireflies Baseball Game  
Full BBQ on the Pavilion, Kids Zone, Fireworks and Ballgame!!  
Event will take place between 5:00 pm to end of fireworks

In our group: \_\_\_\_\_ Ages 0 to 2 \_\_\_\_\_ Ages 3 to 12 \_\_\_\_\_ Ages 13 to 55 \_\_\_\_\_ Ages 56 and Up

**PLEASE PRINT ALL ATTENDEES NAMES AND AGES**      *Age*

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_ Sorry, I/we cannot attend this year's Summer Event.

***WE MUST HAVE YOUR EMAIL ADDRESS SO WE CAN SEND CONFIRMATION OF YOUR REGISTRATION FORM.***

PRINTED Name of Person completing this Form \_\_\_\_\_

Name and Department of Fallen Officer \_\_\_\_\_

Your relationship to Fallen Officer \_\_\_\_\_

PRINTED Emails of Adults registered on this Form \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Email \_\_\_\_\_

Addresses of Person completing this Form

Email Address \_\_\_\_\_@\_\_\_\_\_

Mailing Address \_\_\_\_\_

Please complete this form and return by **Wednesday, May 19, 2019**, to:

Mrs. Lin Pope  
7 Wade Hampton Dr.  
Beaufort, SC 29907

You may also scan and send this form to: [ccopsresident@gmail.com](mailto:ccopsresident@gmail.com)