

CAVALRY UNIT REGISTRATION FORM  
DOWNLOAD AND MAIL TO:  
LEE-JACKSON PARK, PO BOX 466, LEXINGTON, VA 24450  
or scan/email and submit payment online at [leejacksonpark.com/reenactors](http://leejacksonpark.com/reenactors)

All participants must check in at HQ/Registration upon arrival and agree to safety regulations and to sign release forms

Registration Fee: Contact Organizers

**This form must be submitted for each horse trailer. Use separate sheet for each additional trailer you have.**

All participants must check in at HQ/Registration upon arrival and agree to safety regulations, sign release forms, and receive battlefield passes and maps.

**PLEASE PRINT**

RANK \_\_\_\_\_ NAME(HORSE OR TRAILER OWNER) \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

YOUR Commander: \_\_\_\_\_ Rank: \_\_\_\_\_

Affiliation (Battalion, Brigade, etc.): \_\_\_\_\_ Commander: \_\_\_\_\_

Parking Space needs. Vehicle with attached horse trailer total length: \_\_\_\_\_

Number of horses in this trailer \_\_\_\_\_

( ) Yes. All horses & mules have current Coggins certificates to present at registration HQ.

( ) Desire to camp in period campsite. ( ) Desire to camp modern with trailer.

I hereby acknowledge to follow all rules, and safety regulations governing this event:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

UNIT NAME \_\_\_\_\_

OTHER CAVALRYMEN ATTENDING WITH YOU AND YOUR HORSES

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

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