

Re-enactors Group/Individual Registration Form Spetchley Park 11th / 12th August 2018



Name of Group							Period			
			Contact	t Details						
Contact Name										
Email					Web Site					
Tel: LandLine				Tel: Mo	obile					
Postal Address										
House (no) /Road										
Town										
County		Postcoo			e					
		ı	Re-enactor	s Attend	ling					
Role		N	Number		Role			Numi		
			Ten	tage						
Living History				Modern						
Туре	Size		Number			Size			Number	
To help with the layout of the LH camp area please say			Numbers (personnel) Camping							
what area you need for your camp				Living History						
Area in Metres			Modern Camp							

Cavalry									
If you are Bringing Cavalry How many horses will you have									
Do You Want a Pi	cket line on the	Yes	Please	How much space			will yo	u need for	
LH Camp		No	Tick	the picket line					
Canon / Musketry and Black Powder									
Please supply details below if you are using Black powder over the weekend. The M5 powder master will contact									
you with details, ALL powder will have to be stored in a designated area for the M5 Event.									
Number of		Amount of Powder on site during the Day							
Number of Canon Amount of powder being stored on site						ored on site			
Your unit Powder Master details									
Name				Email					
Tel: Land line					Tel: Mobile				
If you have any Qu	ueries on Powder	requirem	ents You can	contac	t:				
M5 Powder Mas	ter: Chris Modd	Emai	l Contact	Modd	y165	1@gm	ail.com	1	
Vehicle Passes									
Vehicles arriving Saturday / Sunday will need to display a Vehicle pass in their windscreen How many Vehicle passes do you need									
Please supply a self addressed, stamped envelope for them to be sent out to you									
				/.		.,			
Living History Display / Display information (tick for Yes or No in the boxes)									
What activities will you have on the LH campsite									
\A/:II		- f 1:-	-12						
Will you want to use the small arena for a display ? Please tick option			on Yes		No		If Yes describe display be	ow	
Do way want to to	lea mant in maniad	ن جامنداداد		<u> </u>					
Do you want to take part in period skirmish in main arena Please tick optio			I YES	i	No				
Insurance									
What Insurance d	o you have?								
What does it cove	r?								
Please supply cover of insurance cover to be returned with this completed Form									
Please fill in the form and return to; Brian Bullock									

187 Oldbury Road

Worcester WR2 6AR

If you have any queries please get in touch by email or phone

Email wrbrian@yahoo.co.uk

Phone **07508 017 013**