



MICHIGAN'S G.A.R. MEMORIAL HALL & MUSEUM

GRAND ARMY OF THE REPUBLIC, MICHIGAN DEPARTMENT,
JAMES B. BRAINERD POST #111 MEMORIAL HALL AND MUSEUM, INC.

224 South Main Street
Eaton Rapids, Michigan 48827

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REENACTOR REGISTRATION FORM

MICHIGAN'S G.A.R. MEMORIAL HALL & MUSEUM
CIVIL WAR LIVING HISTORY
JUNE 30 - JULY 4, 2023
UNIT PRE-REGISTRATION (ELECTRONIC FILL-IN) FORM

Completed Form should be sent in by June 15, 2023 to secure amenities

Unit/Group _____ ?U.S. ____ ?C.S. ____ ?Civilian ____ ?Other (specify) _____

Contact: _____

Street Address: _____ Ph.(____) ____ - ____

City: _____ State: ____ Zip: _____

E-Mail Address _____

Infantry **Artillery** **Cavalry** **Medical** **Civilian** **Other (specify)** _____

Total Total Total Total Total Total

Artillery

Cavalry

Number of Cannon _____

Number of Horses _____

Type of Cannon _____

You must have proof of Coggins Test**

Type of Cannon _____

Number of Artillery Trailers _____

Number of Horse Trailers _____

****Cavalry:** In order to register, upon arriving at the Civil War Living History, you must have a copy of the Coggins Test with you for each horse. This is required for the health and safety of all horses at the event. If you do not have these papers with you, you will not be allowed to participate or keep your horse at the

event. In addition, no stallions will be allowed. Finally, please remember to bring your own supply of hay for your horse as the event will be unable to provide hay this year.

Camping Information: Military and Civilian camps will be kept separate.

Military Camping

Wall Tents _____

Wedge _____

Sibley _____

Shelter _____

Campaign _____

Civilian Camping

Wall Tents _____

Wedge _____

Sibley _____

Shelter _____

Campaign _____

Modern Camping

Total modern sites _____

Participant Name List:

Name (If Military, state Rank otherwise indicate "Civilian")

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

15. _____

16. _____

17. _____

18. _____

19. _____

20. _____

Attach and send additional sheet if necessary.

On behalf of my unit/organization, I have read and hereby agree to comply with all conditions as set forth in the Registration information supplied. I understand that failure to comply with these conditions may be cause for removal.

Signature: _____ Date: _____

Return Completed Form by June 15, 2023 by email attachment or US mail to secure amenities

Email:

garmichigan@gmail.com

US Mail:

**Michigan's G.A.R. Memorial Hall & Museum
244 South Main Street
Eaton Rapids, Michigan 48842**