

<u>Living History REGISTRATION FORM</u> <u>September 9, 10, 11, 2022</u>

Group/Unit Affilia	ation:			
Name:				
Mailing Address:				
City:		State:	Zip:	
Cell Phone Daytin	ne:			
Email:				
Emergency Conta	ct Information:			
Name:	Relationship:			
Phone No:				
Departure on Sunda Are you camping or	ime of Arrival? Thursday_ ay after the show n the AIRSHO grounds with icles bringing to AIRSHO:	or Monday	?	
Year:	Type:			
List ALL Weapon	ns bringing to AIRSHO:			
For Group/Unit Leade	<u>ers only:</u> Total Square Foo	tage Requested for	Encampment	
Other Special Reques	its:			

Return Form to: CAF High Sky Wing AIRSHO 2022 or Fax

NO LATER ATTN: Living History Registration

THEN P. O. Box 61064
SEPT. 1 Midland, TX 79711

Fax to: 432-685-1277

Email: goldendc1861@yahoo.com

Questions Contact: Cody Golden