

Reenactors of the American Civil War

Visiting Re-enactor

Adult Registration Form

If you are a member of a Civil War reenactment group that is duly recognized by the RACW, you may participate at any RACW event upon filling out this form and contacting the appropriate RACW Brigade Commander. You will be issued a Visiting Reenactor ID card that you must carry with you at all times during any RACW event. This card will be good for the entire year and it must be presented or surrendered upon request when asked to by any Brigade Command staff, Unit commander, or RACW Board member.

General Release of Liability & Agreement Not To Sue

Since re-enacting is dangerous, we require all participants and parents of participants to assume all risk by signing this general release.

INITIAL HERE _____ I acknowledge that reenacting, black powder shooting, and related activities are hazardous activities and that I have made a voluntary choice to participate in those activities despite the risks that they may present. In consideration of my being permitted to participate in the activities of the RACW, I agree to assume ANY AND ALL RISKS OF INJURY AND DEATH which might be associated with or result from my participation in RACW events or activities. Such risks of injury or death may be caused in whole or in part by: burns, cuts, terrain conditions, heat prostration and related conditions, gun powder explosions, impacts from debris, accoutrements, vehicles and/or weaponry, the failure to follow command orders, and rules and regulations of the RACW, rescue efforts or medical attention provided by anyone connected with the RACW, cardiac conditions, falls, or contact with animals. (NOTE: this is not a list of all hazardous activities related to civil war reenacting and black powder shooting. Accordingly, even if injury or death is caused by some risk or hazard not listed above, I still agree to assume any and all risk of injury and death which might be associated with or result from my participation in RACW events and activities.)

INITIAL HERE _____ I further release, waive, discharge and covenant not to sue the RACW, the organizers of any RACW event, the trustees of, officers of, agents of, or members of the RACW, or any owner or lessor of any property on which the RACW conducts any activity from all liability myself, or any party claiming an interest through myself, for all loss or damage or demand therefore on account of injury to the person or property or death of myself, whether caused by their negligence or for any other reason, while preparing for, practicing for, traveling to or from, or participating in any RACW event.

INITIAL HERE _____ I further INDEMNIFY AND HOLD HARMLESS the parties released above and each of them from loss, liability, damage or claim they may incur due to the presence of my actions during the RACW activities whether caused by their negligence or otherwise.

INITIAL HERE _____ It is the intent of the undersigned that the above Release be as broad and inclusive as allowed by law, and that if any portion be invalid, the remainder shall continue in full force and effect. This Release is entered into solely for the benefit of the RACW, its officers, trustees, agents, affiliations, and members when engaged in activities which promote the participation in the RACW sanctioned activities, or the preparation for or travel to such activities, and does not confer a Release upon parties not acting in such a capacity.

INITIAL HERE _____ In consideration of my participation with the RACW, I understand that the RACW may video and photograph me during RACW-sponsored events. I hereby give the RACW the unrestricted right and permission to copyright and use, re-use, publish, and re-publish video and/or photographic portraits or pictures of me for the production of materials for funding raising, educational displays and advertising of the RACW and Living History. Such materials can include, but are not limited to, DVD movies, photo albums, or individual portraits; such items to be offered to the public attending RACW-sponsored events with proceeds going to benefit the RACW and its activities. I hereby relinquish any right that I may have to examine or approve the completed product or products or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it may be applied. I hereby acknowledge that no compensation or remuneration of any sort is offered or implied for the use of any images taken or used by the RACW.

I, the undersigned, have read and understood this Release and all its terms. I warrant that the above is true and correct in all respects and that no representations, statements, or inducements apart from the foregoing have been made. I consent to whatever medical care might be provided or available for injury occurring during the above activities.

Signature: _____ **Date:** _____

Name (First, Middle, Last):		Birth Date:	Age:
Address:		City, State, Zip:	
E-mail Address (for RACW dispatches & announcements):			
Home Phone:	Work Phone:	Cell Phone:	Emergency Contact Phone:
Emergency Contact Info:	Name:	Relationship:	
Do you have any physical or medical conditions restricting your activities? Yes No -- If yes, please describe: _____			
RACW OFFICE USE ONLY			
Date Received:	Amount Received:	Date Approved:	Visitor Card Number:
			Date Card Mailed:
			Brigade/Unit:
Notify respective Brigade Representative of your planned attendance (see www.racw1861.org for contact information) bring the this form with you to the event or mail this form <i>three weeks</i> before first event you are planning on attending to:			
		RACW BOARD SECRETARY	
		Jeanette Rodriguez	
		P.O. Box 43	
		Lookout, Ca 96054	