

School of the Musketeer 2017

October 7 & 8, 2017

Henricus Historical Park- 251 Henricus Park Rd, Chester, VA

sponsored by

The Kingdom of Lucerne

Contact name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone # (_____) _____ Email: _____

VENDORS: In keeping with the theme of SOM, all goods must be representative of 17th Century Europe.

REGISTRATION FEES ARE AS FOLLOWS:

WEEKEND RATE Includes barracks-style billeting (NO PRIVATE ROOMS AVAILABLE), 3 meals on Saturday, 2 meals on Sunday and participation in all classes

PARTICIPANT	\$35.00
MERCHANT	\$35.00
*CHILD (UNDER 12)	\$20.00
INSTRUCTOR	\$15.00

You may arrive any time between 4:00 PM and 11:00 PM on Friday, October 6, 2017. If you will be arriving on Friday, please indicate your estimated time of arrival**. Dinner on Friday is not included; however, there are local restaurants. Information will be available when you arrive.

A. We will be arriving at approximately _____ PM on Friday.

*Children must be supervised by an adult at all times. A children's track is NOT being offered, however some classes are child-friendly. Some classes may have a materials fee. Please check the class schedule for details.

B. Please list all members of your party - please include yourself! Please indicate your Interest (one or more).

Name	Phone #	Type of Registration	Rate	Military	Civilian	Interpretation

TOTAL ENCLOSED _____

c. In Case of Emergency phone#: area code (_____) _____ - _____

D. Do you (or any member of your party) have any health or medical conditions for which our EMS should be made aware? YES___ No___
If yes, please visit with our EMS upon your arrival.

E. Only Kingdom of Lucerne **INSTRUCTORS** are permitted to demonstrate **any** form of weaponry use. I and my party agree to abide by all safety practices set forth by Kingdom of Lucerne. **Signed** _____

Registrations must be received by Saturday, September 23, 2017 in order to guarantee meals. Registrations received after Saturday September 23, 2017 will be placed on a waiting list for meals, but will not be guaranteed. Order on the waiting list will be determined by the date the registration is received. NO EXCEPTIONS. NO REFUNDS. Please mail completed registration form and payment to:

The Kingdom of Lucerne, Inc.
c/o C. M. Schum
700 Gorham Ave
N. Cape May, NJ 08204
e-mail: Lucerne.Treasurer@comcast.net