

OPERATION NEPTUNE

25th - 26th September, 2010

Return completed forms to:

Ben Major
Operation Neptune
PO Box 213
Boston
PE21 1DG

RE-ENACTOR REGISTRATION FORM

Please complete the following form and return to the address at the top of this document. In order to expedite the registration process, please ensure that all necessary fields have been correctly entered. **Completed forms must be returned no later than 1st August, 2010.** When returning your completed form to the event organiser, please be sure to enclose proof of valid Public Liability Insurance for a minimum total indemnity sum of £5,000,000.

1. GROUP DETAILS

Group Name:	<input type="text"/>		
Contact Name:	<input type="text"/>		
Contact Address:	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
Postal Code:	<input type="text"/>	Telephone:	<input type="text"/>
Unit Portrayed:	<input type="text"/>		
E-mail Address: (if applicable)	<input type="text"/>		
Group website: (if applicable)	<input type="text"/>		

2. EVENT DETAILS

Display Size: (Width and depth)	<input type="text"/>		
Preferred display area: (Please tick)	<input type="checkbox"/> Sand dunes	<input type="checkbox"/> Grassed area	
Number of Parking Passes required: (For civilian / support vehicles only)	<input type="text"/>	Number of members: (Attending the event only)	<input type="text"/>

By signing this document, we* declare that proof of valid PLI† for our group to attend this event is enclosed. We* also understand that the event organiser withholds the right to reject an application due to invalid insurance details up to 48 hours before the event is to take place. We* also agree to abide by the direction of the event marshalls and staff.

Signed: _____ **Dated:** _____ / _____ / _____

* Members of the entity herein referred to as "the group", or "group".
† Public Liability Insurance