

TREK REGISTRATION FORM  
 APPALACHIAN WAGON TRAIN ASSOCIATION, INC  
 Westmoreland/Fayette Counties  
 JUNE 16-22, 2019

Registration forms and payment must be in the hands of the secretary by June 02, 2019. Please put 1(one) Family and 1(one) address to a form. Please PRINT all information. Thank You.

**PLEASE FILL IN THE ENTIRE FORM  
 INCOMPLETE FORMS WILL BE RETURNED**

HEAD OF HOUSEHOLD Last Name \_\_\_\_\_ First name \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
\*\*If you would like to share your number with wagon train members

Address: \_\_\_\_\_

Emergency Contact Person and Phone Number: \_\_\_\_\_

**REGISTRATION INFORMATION:**

PRINT NAME	ADULTS \$20	YOUTH \$6	Child's Age	UNDER SIX (free)
1 _____	_____	_____	_____	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____
4 _____	_____	_____	_____	_____
5 _____	_____	_____	_____	_____
6 _____	_____	_____	_____	_____
Total for each column:	_____	_____	_____	_____

Chuck wagon Fee(s) \_\_\_\_\_ x \$60 for each person ordering \_\_\_\_\_  
 (5 and under free) Grand total for Registration \$ \_\_\_\_\_

\*Please let me know if you plan to be on the field for Thursday evening meal Yes \_\_\_\_\_ No \_\_\_\_\_

\*Please let me know if you plan to be on the field for Friday evenings meal Yes \_\_\_\_\_ No \_\_\_\_\_

\*Please let me know if you plan to be on the field for Saturday evening meal Yes \_\_\_\_\_ No \_\_\_\_\_

If you plan on eating, please tell me how many are in your group. ADULTS \_\_\_\_\_ YOUTH \_\_\_\_\_

TOTAL AMOUNT DUE BY JUNE 02, 2019

“Membership Dues and Registration” must be paid for 2019 to participate on the trek.  
 Only “Trek Registrations” are to be included on your check. If paying for anything else  
 you must make out a separate check for each, Membership Dues, Book Ads, etc.

A \$50.00 fee will be placed on all returned checks regardless of reason.

PLEASE MAKE CHECKS PAYABLE TO: **APPALACHIAN WAGON TRAIN ASSOCIATION**

Mail all information to: Edith (Sis) Crosby, 113 Myers Street, Ebensburg, PA 15931 PH: 814-472-8907

E-mail to: [awtsiscrosby@aol.com](mailto:awtsiscrosby@aol.com).

**YOU MUST COMPLETE BOTH SIDES OF THIS FORM**

**PLEASE FILL IN THE FOLLOWING INFORMATION PERTAINING TO YOUR ANIMALS**

\_\_\_\_\_ Buggies pulled by \_\_\_\_\_ Horses and /or Mules. \_\_\_\_\_ Wagon pulled by \_\_\_\_\_ Horses and /or Mules.  
\_\_\_\_\_ Horseback riders

HOME OWNER'S Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Policy Holder Signature \_\_\_\_\_

All members and participants **must** carry insurance and are signifying by their signature a willingness to accept full responsibility for any and all damage done by them and/or their animals and/or their guest on the trek.

EVERY PARTICIPANT 18 YEARS OR OLDER MUST SIGN THIS HARMLESS AGREEMENT!

I AGREE TO ABIDE BY ALL DIRECTIONS, RULES AND REGULATIONS OF THE APPALACHIAN WAGON TRAIN ASSOCIATION.

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

***Our Wagon Train is made up of each and every one of us.  
It cannot be run by only a few.***

Your help is needed and would be greatly appreciated in any way you can, please mark the things you can do from the list below. If you feel you could help in some other way, please contact the secretary or speak with a board member.

- |   |   |
|---|---|
| _____ <b>Be a Scout</b>   | _____ <b>Help sell Books</b>                  |
| _____ Help with programs on field.                              | _____ Help with all games.                    |
| _____ Help set up for Opening Activities                        | _____ Assist with Opening Activities          |
| _____ Help Move Vehicles.                                       | _____ Help serve Ice Cream                    |
| _____ Keep Extra Books on your wagon for our young Book Sellers | _____ <b>Make sandwiches for Chuck Wagon.</b> |
| _____ Work In Souvenir Wagon                                    |   |