

Buckston Birthday Bash Registration Form

Required*

Please note that you must complete the Minor's Medical Authorization prior to the event and have it with you at Troll (gate). If you have questions about whether you need this form or not, please contact the Registrar. This form is for anyone bringing children/minors who are not their own; i.e., grandchildren, nieces, nephews, playmates, etc. that you are taking responsibility for at this event.

Payment Confirmation*

Please type the check/money order number: _____

Who is the primary registrant? *

Name on the check or money order you are sending

Are you paying for multiple people? *

Yes__ No__

Attending Feast:

Yes__ No__

Modern First & Last Name *

SCA Name (without title)

Membership # (Enter 0 if you are a non-member)

Membership Expiration Date (MM/DD/YYYY)

Please list the names of those you are paying for and a membership number, if they have one.
Please indicate if they are attending the Feast.

Name 1: _____ Attending Feast: Yes__ No__
Membership #: _____

Name 2: _____ Attending Feast: Yes__ No__
Membership #: _____

Name 3: _____ Attending Feast: Yes__ No__
Membership #: _____

Name 4: _____ Attending Feast: Yes__ No__
Membership #: _____

*Applicable Site Amount **

Please select the applicable site fee for this registrant. Please include the Feast in your payment total.

- o Adult Member Discounted: \$10 x ____ = _____
- o Adult 18 & up: \$15 x ____ = _____
- o Youth 6 - 17: \$5 x ____ = _____
- o Youth 0 - 5 Free: \$0 x ____ = _____
- o Feast (all ages): \$10 x ____ = _____
- o Total Payment Due: _____

******There is limited seating at our feast and it is on a first come first serve/reserve system.

*Is this registrant part of a Family Max? **

If yes, please verify that you have spoken with the Registrar before submitting your registration. (If you are unsure you can contact the Registrar.) The Family Max is \$30 based on 2 adults and 2 children for members, \$40 for non-members.

Yes__ No __

Email: _____

If you would like to receive a confirmation email, please provide an email address. Email addresses will not be used for any other purpose and are protected by Society & Kingdom Law.

Registrar Contact Information

M'Lady Æsa Köttr

c/o Stacy Whitney

9408 Theresa Ln

Rougemont, NC 27572

aesa@sands-edge.com

Please make checks payable to: SCA, Inc. Canton of Buckston-On-Eno

Refund Policy

All refund requests must be submitted in writing by November 10, 2018. Email submissions are accepted. Any refunds submitted after this date must be due to extenuating circumstances and will be treated on a case by case basis.

Refunds will be issued within 10 days of the closing of the event's books. Verbal requests will not be honored unless accompanied by written by request.