

**Carolinas O.A. Indian Seminar
Registration Form
Postmarked by January 10, 2014**

Name of Your Group
Please include your Lodge Number

*For additional information,
contact Tammy Miller at
southernunicorn@yahoo.com*

Adult Leaders: Two-deep gender appropriate leadership is required. Leaders are responsible for Tour Permits and Medical Forms/Releases. Leaders are responsible for the conduct of their group at all times.

Adults

Name	Sex	Mailing Address	City, State & Zip	Phone
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Group Leader

Other Adults

Participants Name	Youth or Adult	Sex	Participants Name	Youth or Adult	Sex
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List additional names and e-mail addresses on the back of this sheet
Please make copies of this sheet if additional space is needed.

Please supply all the following information

Number of MALES needing indoor accommodations at MCC: _____

Number of FEMALES needing indoor accommodations at MCC: _____

Number staying in area motels = _____

We have special meal needs NO YES (list details on back) _____

We request vendor space NO YES _____

We need handicap considerations NO YES (list details on back) _____

Total Number of Participants _____

X \$38 Registration Fee _____

TOTAL AMOUNT ENCLOSED \$ _____

Mail to: Eswau Huppeday Lodge
C/O Tammy Miller
3005 Dresden Drive
Gastonia, NC 28056

Make check or money order payable to: **Eswau Huppeday Lodge**

REGISTRATION IS TRANSFERABLE BUT NO REFUNDS

