NMCB 8 REUNION 2008
REGISTRATION FORM
September 24 – September 28, 2008

(Please print all information)

Member Name _____
List name as you wish it to be on ID badge

Guest Name (s) _____

Home Address _____
Street City State Zip

Email Address _____

Emergency Contact _____
Name Phone Number

Planned Arrival _____ **Planned Departure** _____
Day/Date Day/Date

Date (s) served in MCB8 _____ **Craft** _____

Please read and sign the following

I understand that the 2008 reunion is a non-alcoholic sponsored event. Any alcoholic drinks that I purchase during the four-day event from the hotels, caterers or other sources will be at my own discretion. I agree to hold harmless the NMCB – 8 2008 Reunion; its directors, officers, reunion planners, and membership for any and all acts, or consequences from my conduct or the conduct of my guests. I also authorize the release of all photos of the event for future publication by the association. I further understand that all meals are at my expense.

_____
Signature Date

Deadline for registration is August 15, 2008.

Mail completed forms and payment to

Troy F Branch
454 Indian Gap Road
Sevierville, Tennessee 37876
Phone 865-428-2390

Make checks payable to "NMCB – 8 2008 Reunion"