

For Office Use Only - Do Not Write In This Space

Church / Dancing / Music / Poet or Talks / Sat only / Sun only / Both days / Selling /
 want Reimbursement / Elec / Water / Lock / Fri. Potluck Guest / Sat. Vol Dinner Guest
 Paid for guest tickets / vol coupons/ Camping / Selling Agreement sent / Agreement returned /
 Weapon Completed Weapon Course / Special Parking / Car Pass _____ Note _____

JULY 15-16, 2017 BANNACK DAYS APPLICATION FOR CHURCH/ DANCE / DRAMA / MUSIC / POET OR TALKS /

Please Print Clearly

NAME OF GROUP LEADER: _____

ORGANIZATION or Group Name: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: (Wk / day) _____ (Home) _____ (evening) E-mail: _____

Please list all members that will Be Actively Participating (Maximum of 10).	Age if	I	Attending	Attending	Working	Camping
	<u>under</u>	need	Fri Night	Sat Vol	both	with
	18	a car	Potluck?	Dinner?	Sat & Sun	Your
		Pass	Yes or No	Yes or No	or only one?	Group?

PRINT CLEARLY PLEASE!

(Limit 5)

Example: Jane Doe	Age14	Yes	YES	YES	BOTH	YES
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|-----------|-------|-------|-------|-------|-------|-------|
| 1. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 4. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 5. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 6. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 7. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 8. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 9. _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 10. _____ | _____ | _____ | _____ | _____ | _____ | _____ |

Note: You may attach another piece of paper if more room is needed—but please list **ALL** information.

(Need address with application of new people this year)

(Group leaders are responsible for returning completed paperwork for each member, and distributing all information to members—(Including Sat Night Vol Dinner Information) ONLY 5 CAR PASSES ALLOWED

*All participants must dress in period attire (women, no jeans or pants / men & women, no Tank-Tops & no Flip-flops—they are not period dress!)

1. I (WE) WOULD LIKE TO PROVIDE: (Music, Church service, Dancing, Drama, etc.)

A. Please describe what type of activity it is you or your group would like to provide ?

B. Do you want to sell items associated with your activity, such as music CD's ? **__YES__ NO**

Must list all items and price you want to sell. (Items and Prices can not change after signed contract) **There is no fee if your sales are under \$100.00**

2. PLEASE COMPLETE:

- A. Do you need electricity? (Limited availability in Bannack) YES ___ NO___ Note_____
- B. Do you need to be near water or have water available? YES ___ NO___ Note_____
- C. Do you need a lockable building? (Limited availability) YES ___ NO___ Note _____
- D. Due to a disability will anyone in your group need accessible parking? YES___ NO ___ Note_____ Name of person:_____

E. Will you be available on: ___ SAT 9am - 5pm / ___SUN 9am - 4pm / Other time:_____

F. What is your location preference: _____

G. What is your day/time preference for scheduled activities (**Talks**):_____

H. Do you need camping at Bannack? YES___ NO___ (Limit: 2 camp spaces and 2 vehicles per group—10 people)

Check one: 1 Camp Space___ / 2 Camp Spaces___ / # Of people camping ___(max 10 per group)
Name if not listed on front page:_____

Type of camping ___ RV / ___ Pull Trailer / ___ 5th wheel / ___Tent / _____Other

I. WILL YOU BE CARRYING A **PERIOD WEAPON**? ___YES ___NO / NAME_____ **(ANYONE WITH A PERIOD WEAPON MUST ANNUALLY COMPLETE OUR PERIOD WEAPON SAFETY COURSE— NO EXCEPTIONS!)**

J. How many Car Passes do you need? _____ **(Limit 5 per group)**

3. NOTE : SATURDAY NIGHT VOLUNTEER DINNER (SEE POLICY)

*IF YOU PLAN TO ATTEND SAT VOL DINNER YOU **MUST BE PREREGISTERED ON THIS APP & APP MUST BE IN BY APRIL 1 (NO EXCEPTIONS)** & **Please NO Maybes!** We want to be able to continue to offer this as a benefit.

All **GUEST TICKETS** (Non-Volunteers) are **\$5.00** & must be paid for at this time—non refundable / I need _____ guest tickets. **NAME OF EACH GUEST (don't list those workers on front page –only paying guest)**

(Please make check to "Bannack Association" –tickets will be \$10.00 after April 1st if available.)

Guest tickets are non-refundable—no exceptions.

CHILDREN 5 & UNDER ARE FREE BUT MUST BE LISTED.

CHILDS NAME & AGE_____

PLEASE RETURN THIS APPLICATION BY April 1, 2017

TO: Bannack State Park /4200 Bannack Road / Dillon, MT 59725 / 406-834-3413

PLEASE FILL OUT PHOTO RELEASE FORM