THE TURNER BRIGADE U.S. VOLUNTEERS

ENLIST!

We need you to help save the Union!

Name

Street

City

Phone: H W C

Email:

Check unit of enlistment:

☐ Company G, 17 Missouri Infantry
☐ Company E, 1st Missouri Engineers
☐ Company C, 5th Missouri Cavalry
☐ Civilians

Dues:

☐ Turner Brigade only for first adult: $15.00
☐ Each family member 16+ years old: $2.00 each

Total enclosed: $

$3 of Turner Dues goes to the Preservation Fund.

On back of this sheet, please name family members who are joining the Brigade (16+) and list any other family members (<16) who also will be participating. Also, please tell us about yourself: previous reenacting experience, military experience, or occupation as you see fit.

Please return form and checks made out to "Turner Brigade Association" to:
Scott and Patti House, 1606 Luce St. Cape Girardeau, MO, 63701

U.S. Dollars only.
No Rebel or Confederate Currency, please!
DUES FOR THE ASSOCIATION OF THE TURNER BRIGADE

Dues for the Association of the Turner Brigade are as follows for the year 2020:

$15.00 for a regular membership ($3.00 goes to the Preservation Fund.)
$2.00 for each additional participating family member age 16 or over (living at the same address.)
Members joining after June 1 may join for one half the annual rate.
Members joining after October 1 may have their dues applied to the following full year.

A participant under 16 years of age must have membership in a parent's name even if the parent does not participate.

Example: John Doe — regular member (husband)  $15.00
      Sally Doe — family member (wife)          $2.00
      Timmy Doe — family member (age 3)        $0.00
      Johnny Doe — family member (age 16)       $2.00

      Total dues                                  $19.00

We also recommend membership in the Missouri Civil War Reenactors Association. To participate in events insured by the MCWRA, membership is required. A separate membership form is attached.
2020 Missouri Civil War Reenactors’ Association – Membership Form

Membership Fees Structure: (Please indicate below.)

_____ Life Membership  $100
_____ $10 New Membership: _____ Family  ____ Individual
_____ Renewal Membership (was a paid member in the preceding year)

_____ JANUARY – APRIL 15: $10 per family/individual per year
_____ APRIL 16 – DECEMBER: $15 per family/individual per year

Individuals who plan to carry and or fire a gun will need their own membership for insurance purposes.

_____ Information Change ONLY

Unit Affiliation  The Turner Brigade, Missouri Volunteers, U.S.

Member Name:_________________________________________________________

Rank (if Captain or above) _______________________________________________

Additional Family:_____________________________________________________

Mailing Address:_______________________________________________________

City __________________________________________ State: __________ Zip: _________

Best Contact Phone:_____________________________________________________

Email: ____________________________________________________________________

Please mail this form with a check or money order payable to MCWRA in the appropriate amount to:

MCWRA

  c/o Treasurer
  P.O. Box 431
  Lebanon, MO 65536