

Civil War Campover Muster Sheet

September 19-20, 2008

CIRCLE ONE: REBEL UNION

Soldier's Name: _____

Male () Female ()

Parents Name: _____

Address:

City: _____ **State:** _____ **Zip:**

Home Phone: (____) _____ **Work:**

Cell: _____ **E-mail:** _____

Total Paid: _____ (**\$100 Paid in full required**)

() **Money**

() **Check-made out to Latta Place, Inc. (Check # _____)**

() **Credit Card—Visa / MasterCard**

Number: _____ **Exp:** _____/

Signature: _____

Return to; **Matthew Waisner**
 Historic Latta Plantation
 5225 Sample Road
 Huntersville, NC 28078
 OR
 Fax: (704) 875-1724

(If you have questions, call (704) 875-2312