



Canton of Dun Traigh EVENT PRE-REGISTRATION FORM



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Make checks payable to
SCA, Inc. - Canton of Dun Traigh

Mail form and payment to: **Kenneth Faigh**
3092 Coolidge Road
Muskegon, MI 49441

SCA Name: _____

Mundane Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Number of adult members: _____ x \$5.00 = \$ _____

Number of adult non-members: _____ x \$8.00 = \$ _____

Number of children 12 or under: _____ x \$3.00 = \$ _____

Number of tents: _____ x \$10.00 = \$ _____

Total amount included \$ _____

Bringing this ingredient for the Stone Soup Feast: _____