Reenactor Application Form

44th Annual Battle of Olustee Reenactment
February 14 –16, 2020

UNIT TYPE (select one): ☐ ARTILLERY ☐ CAVALRY ☐ INFANTRY
☐ MEDICAL ☐ CIVILIAN ☐ OTHER (Explain ______________________)

UNIT NAME: ______________________

COMMANDING OFFICER (LIST RANK): ______________________

HOME PHONE: ______________________ CELL PHONE: ______________________ E-MAIL: ______________________

ADDRESS CORRESPONDENCE TO: NAME: ______________________

MAILING ADDRESS: ______________________

CITY: ______________________ STATE: ______________________ ZIP CODE: ______________________

Each Individual Unit Member Must Present a Photo ID and Register On-Site

NO black powder weapons of any kind will be carried or fired by any participant under 16 years of age. Children are not permitted on the field during the reenactments.

We have the following SPECIAL NEEDS, MEDICAL PROBLEMS OR REQUESTS

Exemption From Public Disclosure
Are you a current or former law enforcement officer, other employee* or the spouse or child of one who is exempt from public records disclosure under S11907, F.S.?

*Other covered jobs include: correctional and correctional probation officers, firefighters, certain judges, assistant state attorneys, assistant and statewide prosecutors, personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support, and certain investigators in the Department of Children and Families.

☐ Yes ☐ No

I understand as Unit Commander of this unit, it is my responsibility to ensure that individuals within my unit utilizing historic weapons or historic black powder weapons at Olustee Battlefield Historic State Park are at least 16 years of age or older.

I also understand it is my responsibility to have a signed permission slip and notarized medical authorization form in my possession for any reenactor of minor age within my unit.

I also understand that my entire unit will be asked to leave the Olustee Battle Event if underage reenactors from my unit are in violation of the Florida Park Service age limit policy.

Unit Commander ______________________ Date ______________________

Return all Pages of Application To:
Olustee Battlefield Historic State Park
Post Office Drawer G
White Springs, Florida 32096
CAVALRY REGISTRATION INFO

In the Cavalry camp, all horses must be inspected and have current Coggins verified. Any horse not inspected will not be allowed in the battle. All horses and riders must comply with the Cavalry Regulations. All Cavalry should enter the event through the Front Gate on Thursday. Cavalry arriving Friday through Sunday should enter through the gate off 250-A.

- **# of Horses:** [ ]
- **# Wagons:** [ ]
- **# Artillery Pieces:** [ ]
- **# of Horse Trailers:** [ ]

   **WE WILL CAMP AUTHENTIC**

INFORMATION REGISTRATION INFO

- **Unit Name:** [ ]
- **Commanding Officer:** [ ]
- **Portray Confederate Only:** [ ]
- **Portray Federal Only:** [ ]
- **Number of Unit Members Planning to Attend:** [ ]
- **This Unit is willing to galvanize to blue on Saturday:** [ ]
- **This Unit is willing to galvanize to blue on Sunday:** [ ]

INFANTRY REGISTRATION INFO

- **We are not camping:** [ ]
- **We will be bringing:** [ ] horses.
- **We will camp AUTHENTIC:** [ ]
  - "A" [ ] Wall Tents [ ] Shelter Halves [ ]
- **We will camp MODERN:** [ ]
  - Tent(s) [ ] Camper(s) [ ]
- **We will need modern spaces (area = [ ] sq. ft.):** [ ]
- **We wish to be BRIGADED WITH:** [ ]

   **ARTILLERY REGISTRATION INFO**

This is a full scale artillery only event. **Only 22 guns will be permitted on the reenactment field.**

The overall commander for artillery will conduct inspections of all artillery pieces to be fired. No artillery pieces may be fired without first being inspected.

- **TYPE OF GUN(S):** [ ]
  - **I. Limber:** [ ] Yes [ ] No [ ] Wheel Size: [ ]
  - **II. Ammunition Chest - Full Scale Only:** [ ]
  - **III. Powder Charge Size in ounces (See Table of Maximum Loads):** [ ]
  - **IV. Charge Construction description:** [ ]

   (Aluminum foil only, no plastic bags. No additional materials such as flour or sawdust)

For Questions Regarding Participation as an Artillery Unit at the Battle of Olustee Contact

   Mark Akers, Artillery Camp Coordinator - e-mail: archakers@gmail.com

IMPORTANT:

All horses must be inspected in the Cavalry camp and have current Coggins verified. Any horse not inspected will not be allowed in the battle. All horses and riders must comply with the Cavalry Regulations. **All Cavalry should enter the event through the Front Gate on Thursday. Cavalry arriving Friday through Sunday should enter through the gate off 250-A.**

- **# of Horses:** [ ]
- **# Wagons:** [ ]
- **# Artillery Pieces:** [ ]
- **# of Horse Trailers:** [ ]

   **WE WILL CAMP AUTHENTIC**
MEDICAL UNIT REGISTRATION INFO

We are not camping □
We will camp AUTHENTIC □ "A" Wall Tents □ Shelter Halves □
We will camp MODERN □ Tent(s) □ Camper(s) □
We will need □ modern spaces (area = □ sq. ft.)
We wish to be BRIGADED WITH:

Our Medical demonstration area requires: □ ft X □ ft

We can set up for the:
□ Friday School Day demonstrations □ Saturday 1:00 P.M. demonstration

CIVILIAN UNIT REGISTRATION INFO

We are not camping □
We will camp AUTHENTIC □ "A" Wall Tents □ Shelter Halves □
We will camp MODERN □ Tent(s) □ Camper(s) □
We will need □ modern spaces (area = □ sq. ft.)
We wish to be SET UP WITH:

Our demonstration area requires: □ ft X □ ft

We can set up for the:
□ Friday School Day demonstrations □ Saturday 1:00 P.M. demonstration

We Will Demonstrate/Portray – Please list all
<table>
<thead>
<tr>
<th>Volunteer Organization Title</th>
<th>Organization Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization Address</td>
<td>Organization Telephone</td>
</tr>
<tr>
<td>Leader Name (Last, First, Middle initial)</td>
<td>Leader Telephone (Best)</td>
</tr>
<tr>
<td>Leader Address (Residence)</td>
<td>Leader County of Residence</td>
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<td>Leader E-mail</td>
<td>Anticipated Number in the Group</td>
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<tr>
<td>Project Date</td>
<td>Park Name</td>
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<td></td>
<td>Olustee Battlefield Historic State Park</td>
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**Group Project Description:**

Reenactors for 156th Anniversary Olustee Battle Reenactment

I, (print name), as leader of this group, agree that the group members will abide by all applicable Florida Park Service (FPS) rules, policies, and standards governing volunteers. I acknowledge it is my responsibility to become familiar with the contents of the FPS Volunteer Handbook and the Olustee Battle Reenactor Guidelines. A copy of the **Volunteer Handbook** may be provided by the park or can be found online by selecting the link above.

The individuals named on the Group Participant List (attached) will participate as reenactors at the Olustee Battlefield Historic State Park for the Olustee Battle Reenactment activities scheduled for February 15 - 19, 2018. I have secured permission from the parents of all of the volunteers in the group under the age of 18. I have emergency contact information for each participant.

I understand that volunteers are not considered to be employees of the State of Florida. Volunteers are covered by state liability protection (Section 768 28. F.S.) and workers compensation (Chapter 440, F.S.). No other benefits of collective bargaining agreements apply. I understand my volunteer services can be terminated by the FPS, or I can terminate my volunteer status, at any time, with or without cause, and I do not have the right to grieve or appeal.

I understand that volunteers on duty for the Department may have photographs or videos taken and the materials may be used to promote the Department, Olustee Battlefield Historic State Park and the Olustee Battlefield Citizens Support Organization. No further releases are required.

I understand that I, as group leader, may be asked to provide date of birth, driver's license number or other proof of identification, and/or social security number at a later date. I certify that all of the information contained in this application is true and correct. I authorize the Florida State Parks to verify the information provided.

**Group Volunteer Leader Signature**

**Supervisor Signature/Park**

The mission of the Florida Park Service is to provide resource-based recreation while preserving, interpreting and restoring natural and cultural resources.

FPS-A062 REV 12/2012
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