



FA'er NAME \_\_\_\_\_ AGE: \_\_\_\_\_ WHEELCHAIR:  YES  NO  
 ADDRESS \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_  
 CITY/STATE \_\_\_\_\_ PHONE \_\_\_\_\_  
 EMAIL \_\_\_\_\_ CELL \_\_\_\_\_  
 EMERGENCY CONTACT (NOT AT EVENT):  
 NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**ACCOMODATIONS**

CAMPING ARE YOU BRINGING A CAMPER?  YES OR  NO  
 HOTEL WHICH ONE? \_\_\_\_\_  
 WHERE WILL YOU HAVE BREAKFAST?  FLYING H RANCH OR  ON YOUR OWN

**TRAVEL**

ARRIVAL DATE/TIME \_\_\_\_\_ DEPARTURE: DATE/TIME \_\_\_\_\_  
 QUESTIONS REGARDING TRANSPORATION CONTACT PAULA HOOK 708-878-5367

**PEOPLE TRAVELING WITH YOU:**

NAME	AGE	T-SHIRT SIZE

**T-SHIRTS:** Unisex Sizes Adult: S, M, L, XL Youth: S, M, L

**FEES:** \$35 per person or \$70 per family. Fee is due at time of registration.  
Includes all meals (lunch Thursday through Breakfast Saturday), activities, and t-shirts  
If you are unable to attend, your fee will be donated to FARA

**DEADLINE FOR REGISTRATION:** June 15, 2019  
Registration is on a first come basis (space is limited)

PLEASE INITIAL THE FOLLOWING:

\_\_\_\_\_ I agree to bring a tent/camper or have a hotel reservation  
 \_\_\_\_\_ I understand the event starts at 10am, Thursday 7/18 & ends 1:00pm Saturday 7/20  
 \_\_\_\_\_ I have enclosed a signed Release and Waiver of Liability for each person attending

PLEASE MAIL YOUR REGISTRATION, CHECK (MADE OUT TO PAULA HOOK), AND WAIVERS  
TO: 8592 W 125 SOUTH  
LA PORTE, IN 46350

or pay via Paypal at [www.hooksflyinghbranch.com](http://www.hooksflyinghbranch.com) and email forms to [ckjhook@aol.com](mailto:ckjhook@aol.com)

*WE ARE SORRY, BUT WE CAN NOT ACCOMMODATE SERVICE DOGS*