



2015 Club Rendezvous  
February 26 to March 1  
Pre-Registration

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ Phone (cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Adult rendezvous fee \$25/adult      Children under 12 free

List full name of persons attending

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Amount Enclosed \$ \_\_\_\_\_

Mail to:

Jefferson Longrifles  
P.O. Box 21348  
Tallahassee, FL 32316