



**Sons of Confederate Veterans
South Carolina Division Convention
April 8 & 9, 2011
Registration Form**



Hosted by Secession Camp # 4, Charleston, SC
Convention site:
Charleston Rifle Club
2221 Heriot Street
Charleston, SC 29403-3023

(Please print clearly)

Name: _____ Phone: _____

Guest: _____

Address: _____

SCV Camp Name & Number: _____

Rank, Title, and or Real Son: _____

Friday Social and Saturday Convention & Luncheon

Registration Fee: **\$65.00** per person (After March 1: **\$75.00**) \$ _____

Saturday Convention & Luncheon Only:

Registration Fee: **\$50.00** per person (After March 1: **\$60.00**) \$ _____

Guest(s): **\$20.00** per person (After March 1: **\$25.00**) \$ _____

Friday Oyster Roast

Guest(s): **\$20.00** per person (After March 1: **\$25.00**) \$ _____

Ancestor Memorial: **\$10.00** (**Extended Deadline: 2/25/2011**) \$ _____

\$5.00 each additional: _____ x \$5.00 \$ _____

Total \$ _____

Please make checks payable to: **Secession Camp # 4**
P.O. Box 12039
Charleston, SC 29422

LUNCH CHECK ONE
Turkey _____
Roast Beef _____

Got Questions? Call Bill Norris at 843-849-9924 or David Rentz at 843-518-7271