

12th Virginia Infantry Regiment
Company B



Longstreet's Corps

Last Name	First	Middle	Name Preferred
Street Address			Home Phone ()
City, State, Zip Code			Work Phone ()
Date of Birth	Place of Birth		Occupation
Spouse's Name	Place of Birth		Birthday
Present Age	If you are under 18 years of age, a letter of consent signed by a parent/legal Guardian is required to participate in the unit. (See attachment)		
High School Graduate	College Graduate (Years Completed)		Degrees Received
Military Service Branch:	Rank at Separation: Date of Discharge:		Years Served
Type of Discharge	If discharge was other than honorable, please explain:		
Citizen of U.S. () Yes () No	If not a U.S. citizen, please give the name and address of the U.S. citizen who is sponsoring you: _____		
Have you ever been convicted of a felony? () Yes () No If yes, please explain:			
HEALTH: Are you aware that Civil War Reenacting can be physically strenuous? _____			
Overall health: _____ Are there any disabilities/special needs that the unit needs to be aware of? _____			
Are you currently taking any medications? _____ If so, for what condition? _____			
Have you any known Allergies? _____ If so, what are they? _____			
Are you now, or have you ever been a member of any group/organization that advocated the overthrow of the Government of the United States? _____ If so, name the group _____			
Are you now, or have you ever been a member of a group/organization that espouses as one of its causes racial superiority, or the obstruction of civil rights as guaranteed by the Constitution of the United States? _____ If so, name the group and the dates of participation:			
Do you read on this subject? _____ Visit battlefields? _____ Relic Hunt? _____			
Collect artifacts from this period? _____			

Do you have any skills that would be helpful to your impression? _____

Why are you interested in the history of the War Between the States? _____

Are you presently a member of any other reenactment group, N-SSA, CWSA, or Muzzle Loader organization:
() Yes () No If yes, please name the group(s):

Are you aware that, starting from scratch, it will cost approximately \$1,000 to outfit yourself with the proper uniform, weapon, and accoutrements for reenacting? _____

Do you understand that you will have one year to obtain the necessary equipment/uniforms to comply with the adopted company guidelines? Do you understand that all uniforms/equipment must be in accordance with adopted company guidelines and subject to approval of the commanding officer or his designee(s)? _____

Have you been familiarized with the Rules, Regulations, and Bylaws of the 12th Virginia Infantry, Co. B? _____

I hereby pledge that I shall conduct myself in an appropriate manner at all times when representing Company B, 12th Virginia Infantry. I further pledge that all of the above questions have been answered truthfully to the best of my ability. I am aware that any untruthful answers will result in my immediate discharge from the unit. I agree to abide by all the rules, regulations, and bylaws of Company B, 12th Virginia Infantry.

Signature Date: _____

Sponsoring Member

Do Not Write Below This Line — For Company Use Only

1st Meeting Attended _____ 2nd Meeting Attended _____

Date Received by Membership _____

Date Membership Accepted / Disapproved _____

Reason for Disapproval: _____

Date Applicant Notified of Decision: _____