

Registration for Descendants' Days

August 24th, 2024

Kindly return completed form with payment.

My family is descended from: _____ Harmonist, Worker, or Other: _____

Registrant Name: _____ Mr. Ms. Dr. _____

Address: _____

Phone: _____ Email: _____

Please write the name of each person in your group as it should appear on their name badge. Unless otherwise indicated, additional persons listed are assumed to reside at the address listed above.

Mr. Ms. Dr. _____

Mr. Ms. Dr. _____

Mr. Ms. Dr. _____

Meals

Participation:

Old Economy Village

Lunch: Yes No

Dinner: Yes No

Special Needs: Vegetarian Meals for _____ (please indicate name)

Other: _____ (please describe)

Participation: Show and Tell – please check applicable sections

_____ Family Tree – please bring digital or hard copy for our files

_____ Photos, Memorabilia or Written Story – please bring a copy to retain on site

Describe memorabilia: _____

Do you need: _____ Electric _____ Table _____ Other: _____

Payment: Registration fee of: **\$125**

prepaid for each participant.

Make payment by check to: *Friends of Old Economy Village (FOEV)*

Payment by Credit Card with: _____ Visa _____ Master Card _____ Discover

Card Number: _____ Exp. Date: _____

Name on Card: (print) _____

Signature: _____

Return reservation and payment to:

Old Economy Village – Descendants' Days
270 Sixteenth Street
Ambridge PA 15003