**RENKUM AIRBORNE 15-16-17 September 2017**

Please fill out in print.

Name…………………………………..…………………………………

Address…………………………………………………………………..

Zip code………….. Town/City …………………………………………

Phone nr./06-………………….………………………………………….  
Email……………………………………………………………………..

Accompanied guest(s) …………………………………………………………………………………………

Vehicle ………………………………………………….registration …….………………………………

Vehicle ………………………………………………….registration …….………………………………

Trailer(s)…………………………………………………………………………………………………

WW2 Civvy or Allied Military Display holders only ( no MV) are welcome at no cost but please state the nature of your display and sign this form.

Campsite : 0 Tent(s) 0 Vehicle(s)  
(modern tents, campers, caravans, support vehicles etc. are not allowed on campsite. Contact the organization for a nearby campground and /or parking)

Estimated space needed including vehicle(s) ..…… Sq/Ft.

Remarks. ……………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………

Free breakfast at : 16 September Yes/No …… persons.

                                                 17 September Yes/No …… persons.

Your entry fee:

Vehicle and driver ………… x € 10,00 = € …………………

Guest ………… x € 5,00 = € …………………

Children up to 12 years free =============

Total entry fee € ………………….

Please transfer a.s.a.p. to IBAN bank account : NL21 RABO 0121 1998 19 BIC : RABONL2U   
in name of: Ed vd Brink Please mention: Renkum Airborne



For further information please contact :

Peter Snapper [petersnapper@upcmail.nl](mailto:petersnapper@upcmail.nl)

Ed vd Brink 06-51137087 [mirjam.ed@planet.nl](mailto:mirjam.ed@planet.nl)

Janet Bakker [janet@renkumleeft.nl](mailto:janet@renkumleeft.nl) (deactivated firearm permits)

Check out : <https://www.facebook.com/groups/renkumairbornereenactevent/>

Participation is entirely at own risk. The organisation accepts no responsibility for any kind of damage or loss of material and personal injury. The vehicles must have third-party insurance and the driver must hold a current drivers licence. Only WWII vehicles may participate.

Date………………………… Name ………………………………………………………………….

Signature……………………………………………………………………………………………….

Please send/ email this form to:

Ed van den Brink, Kanaal Zuid 483, 7371 GL Loenen , Netherlands / Email: [mirjam.ed@planet.nl](mailto:mirjam.ed@planet.nl)