We would like to learn more about your group!

In order for the Civil War Museum to learn more about your presentation and visitor interaction, please complete this form. Your answers will give the Museum staff a better idea as to how we can work with your group and where you will best fit in our interpretation. The Civil War Museum welcomes any photographs showing your unit’s uniforms, camp setup, and interaction with the public. Print this form and mail or fax it to

The Civil War Museum
5400 First Avenue
Kenosha, WI  53140
262-653-4438 (fax)

Unit Name: __________________________________________________________

Official Contact Person: ________________________________________________

Address: ____________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Phone: ____________________________

Email: ____________________________

Website: _________________________

Total number in your group that will be participating: ______________________

Check which of the following describes your group’s programming:

_____ Infantry  _____ Artillery  _____ Cavalry  _____ Medical  _____ Civilian  _____ Political  _____ Naval
_____ Other

Names and ranks of unit officers: _________________________________________
_____________________________________________________________________
_____________________________________________________________________
Please describe your unit’s programming and interaction with the public:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Are there any scripted impressions or scenarios that your group recreates?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Does your group prefer indoor or outdoor programming:
_____________________________________________________________________________________

As the representative for my unit, I have read the rules and regulations set forth by the Civil War Museum and certify that the members of my group will know and understand those rules and will abide by them during the program.

Name: _________________________________ Signature: _________________________________

Rank: _________________________________ Phone: _________________________________

All individuals associated with the group must sign safety and release forms prior to their participation.

Reminder: The Civil War Museum does not allow walk-up participants in living history demonstrations. All presenters must register in advance and complete the required forms before beginning their programming. Non-registered members of a unit should report to their commanding officer and request permission to be included in the list of participants. The commanding officer will then ask the Civil War Museum representative to request the paperwork to include any walk-up participants of that unit. Commanders are responsible for the actions and conduct of their members while on-site at the Civil War Museum.

After receiving your application, the Civil War Museum staff will review the information provided and contact the unit commander using either the phone number or email address provided. Upon acceptance and completion of paperwork, Museum staff will work with your group to schedule a date, time, and location.

All volunteers are subject to City of Kenosha employee work regulations and are subject to censure if they knowingly violate them.