

**WILD WEST HISTORY ASSOCIATION
SOUTHEASTERN REGIONAL ROUNDUP**

Saturday, February 15, 2025

Cartersville, Georgia

(mail or submit via website)

REGISTRATION DEADLINE IS FEBRUARY 1, 2025

Name: _____

Spouse or Others: _____

Address (city, state, zip): _____

E-Mail: _____

Phone #: _____

REGISTRATION FEES

**Includes admission to the Museum
& a catered lunch in the Museum Ballroom**

Number Attending: _____ **Total Amount @50.00 each:** _____

Method of Payment: For Paypal: treasurer@wildwesthistory.org

Or: Check to WWHHA enclosed ____ **Or:** Master Card ____ Visa ____

Name on Card: _____

Card No.: _____ **Exp. Date:** _____

Signature: _____

**Mail to: WILD WEST HISTORY ASSOCIATION
Jean Smith - 993 E Jennings Street - Safford, AZ 85546**

