

Pre-Registration – Swift National 2017 – Cleburne, TX -- October 4-8

Name _____ Spouse/Guest _____ Swift _____
 Address _____
 City _____ State _____ Zip _____
 Cell Phone (s) _____ Email _____
 Arrival Day _____ Departure Day _____
 I plan to use Swift Van _____ Drive my Car _____ Rent a car _____

Wednesday October 4 through Sunday October 8, 2017
 Cleburne Airport KCPT – Cleburne, TX

Host Hotel: Hampton Inn 817-641-7770 (includes hot breakfast) \$79.00/night King or Double Queen
 \$89.00/night King or Double Queen Suite

Additional rooms available at **Holiday Inn Express 817-641-5300** (includes hot breakfast) \$89.00/night or \$99.00/night for Suites

Car Rental: Enterprise 817-645-6996 – Pre-arranged cars can be picked up at the airport

Silent Auction bidding Wednesday to Saturday

Formation clinic begins Thursday

Activities and Meals – Please indicate those you plan to attend for use in planning only.

****Meal tickets will be available for purchase at Registration upon arrival.****

T-Shirts: No obligation, order purpose only.

Size(s) _____ # Desired _____

Hats: No obligation, order purpose only.

Yes _____ No _____ # Desired _____

Possible activities if enough interest

			# Persons
Fly-out: Thursday Ezell Aircraft Restoration - Bridgeport, TX & Lunch	Yes _____	No _____	_____
Fly-out: Cavanaugh Flight Museum – Addison, TX – Date open	Yes _____	No _____	_____
Outing: Friday Bus trip to Ft Worth Stockyards and Dinner	Yes _____	No _____	_____
Outing: Dealy Plaza in Dallas and Lunch - Date open	Yes _____	No _____	_____
Outing: Fossil Rim - Date open	Yes _____	No _____	_____

WEDNESDAY:

Dinner at local restaurant Yes _____ No _____ _____

THURSDAY:

Lunch at Hangar Yes _____ No _____ _____

Formation Ground School Yes _____ No _____ _____

Dinner at Hangar Yes _____ No _____ _____

FRIDAY:

Lunch at Hangar Yes _____ No _____ _____

Dinner at local restaurant Yes _____ No _____ _____

(For those not going to Ft Worth) Yes _____ No _____ _____

SATURDAY:

Lunch at Hangar Yes _____ No _____ _____

(Dinner, Awards, Silent Auction & Raffle Drawing) Yes _____ No _____ _____

SUNDAY:

DEPARTURE

Please include your registration fee (pre-Registration \$40 per person. On arrival \$45 per person)

Persons Attending _____ (\$40 each) **Total enclosed \$** _____

Make checks payable to SWIFT MUSEUM FOUNDATION, INC.

Please make a copy for your records & mail this form & your payment to:

SWIFT MUSEUM FOUNDATION, 223 County Rd 552, Athens, TN 37303

VISA, MC, DISCOVER (only) _____ - _____ - _____ - _____ EXP. ____ / ____