

Lehigh/Susquehanna Operations Weekend 9
Friday, October 6 and Saturday, October 7, 2017
Registration Form

This is a general registration form for either the full weekend or individual layouts. You will be making your choice below. Please check your confirmation to be sure that you are signed up for the correct event. There are a limited number of slots available in each area. The slots will be filled as the completed registration forms are received. There is

NO FEE for registering. If you have questions, please visit the website at <http://www.susquehannamra.org/LSOP/LSOP9> or contact me at wsb@susquehannamra.org

To ensure your slot, please fill out the entire form. You may email the filled out form to me at wsb@susquehannamra.org (instructions are on the website on how to fill out this form and attach it to an email) or you may snail mail it to me – Wayne Betty 936 Wood St, Mount Joy PA 17552-1926

You will receive a confirmation of your registration as soon as I receive it (I would prefer to correspond by email). Please do not hesitate to contact me if you do not receive a confirmation from me.

Personal Information:

Name: _____

Address: _____

City/State/Zip _____

Email: _____

Primary Phone: _____

Secondary Phone: _____

Emergency Contact _____

Name/Phone: _____

This is an NMRA/OPSIG sponsored event, as such Div11 requires participants to be either an NMRA or OPSIG member. The NMRA has a three event allowance for non-NMRA members. You do not need to be a member of both. One or the other is now required.

NMRA # _____, OPSIG # _____

Traveling Companions:

All guests are responsible for their own transportation and meals. If you are traveling with a group of people and need to attend the same layouts for carpooling reasons, please list all of your traveling companions below. Each person should list all others in your group.

Layout Selection:

You may sign up to operate the Lehigh area layouts or the Susquehanna area layouts, but NOT some or Both

Please make your selection below

_____ Lehigh Layouts, all three

_____ Lehigh Layout only one: _____

_____ Susquehanna Layouts, all three

_____ Susquehanna Layouts only one: _____

Operational Difficulty:

Please indicate your experience and operating preferences. This is not required, but will help in determining how and what you would like to operate. It will also enable the layout owners to plan the amount and type of assistance from their local crews that they may need. This is optional – but encouraged.

Please check your preference:

	Novice	Intermediate	Experienced	No Interest
Operations	_____	_____	_____	N/A
Yards	_____	_____	_____	_____
Dispatching	_____	_____	_____	_____

Equipment:

Do you have a Digitrax Throttle _____

Do you have an FRS radio with headset _____

Notes to the organizers:

Is there anything else we need to know or consider? Please let us know:

For Registrar use:

Date Received: _____ Confirmation sent: _____ by email ___ or snail mail ___