

Holy Pail III – Seekers of the Pail  
Reservation Form

Mundane Name	SCA Name	Membership #	Expiration	Weekend/Daytrip	Feast	Price
Total Amount Enclosed - Make Checks Payable to: <b>SCA, Inc., Shire of Rook's Haven</b>						

Special requests/needs/comments:

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Please provide your contact information:

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Mail reservation forms, along with check or money order, to:

Shire of Rook's Haven  
PO Box 2962  
Tupelo, MS 38803