

Okie Mansion Tour

WHEN: Saturday, December 10th

WHERE: Okie Mansion in Lost Cabin

WHO: 12 years and older (12 years and younger must be accompanied by an adult)

LIMIT: 10 Participants

TIME: 12:00pm to 4:00pm

COST: \$5.00

Please be aware that there are stairs and narrow passages in this home. Please use discretion when registering for this event.

Join Shoshoni Recreation and the Fross family in a tour of the historic Okie Mansion. Zane and Ginger Fross will be giving us a tour of their home. This home was built by John Broderick Okie also known as the Sheep King by locals. Built in 1900 Okie Mansion still stands to this day. Come learn more about this magnificent home in the Wyoming prairie. Participants can ride with us or they can follow us out there. When registering please specify if you are driving yourself or riding with us.

- REGISTRATION INFORMATION**
- **DEADLINE:** Monday, December 5th
 - Send a completed registration and fees to: **P.O. Box 356 Shoshoni, Wy 82649**
 - Please give your completed registration, waiver and payment to your teacher to put in the SRD box in the Elementary Office.
 - Bring it to the SRD Office located at 97 S. Maple in Shoshoni



****Please fill out waiver that is attached to this registration.****



Shoshoni Recreation District #24 Registration

Phone #: (307)876-2663 **Phone #:** (307) 876-2572

Email: rec24@wyoming.com **Website:** www.srd24.com

Mailing Address: PO Box 356, Shoshoni, WY 82649

Physical Address: 97 S. Maple, Shoshoni WY

Please either mail this form or bring it in to the SRD Office.

SRD is not responsible for fees/registrations not turned directly in to the SRD Office.

PLEASE PRINT AND WRITE CLEARLY.



Live to Play. Play to Live.

Participant's Name: _____

First Last

Age: _____ Sex: M / F

Participant's Name: _____

First Last

Age: _____ Sex: M / F

Participant's Name: _____

First Last

Age: _____ Sex: M / F

Transportation: SRD Transport: _____ Self Transport: _____

Parent's/Guardian's Name: _____

(If participant is under 18) First Last

Mailing Address: _____

PO Box/Street Address City State Zip

Phone #'s: _____

Home Cell Work

Emergency Contact: (not you) _____

Name Phone #

I hereby release the SRD #24, Zane Fross and Family and staff/volunteers associated with these organization from any liability while participating in **Okie Mansion Tour**. I further give permission for the above participant to be treated medically if my emergency contact cannot be reached. I also understand that I will assume the cost of treatment. Please put only one person per registration form. Please visit our website at www.srd24.com for additional registrations. Your picture may be taken while participating in SRD events and used in our publications. Fees must be paid in full before the deadline; refunds will only be granted if the SRD is notified prior to the start of the program. No tobacco of any kind is permitted within 50 feet of any SRD facilities or vehicles. SRD is not responsible for lost or stolen registrations or fees. We highly suggest that payments are given to us in envelopes labeled SRD.

Signature: _____ Date: _____

OFFICE ONLY: Payment type(\$5.00): Cash _____ Check _____