

# APPLICATION FOR EAST KINGDOM YOUTH COMBAT AUTHORIZATION CARD

## APPLICANT INFORMATION

Legal Name (Print): \_\_\_\_\_ Phone: (        ) \_\_\_\_\_  
SCA Name (Print): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
SCA Local Group: \_\_\_\_\_

## AUTHORIZATION INFORMATION

### Authorizing Marshal 1

Print SCA Name: \_\_\_\_\_ Sign Legal Name: \_\_\_\_\_

### Authorizing Marshal 2

Print SCA Name: \_\_\_\_\_ Sign Legal Name: \_\_\_\_\_

**Please circle all weapon forms that should appear on the Authorization Card:**

Is This Your First East Kingdom Authorization Card?	YES	NO
Is this for an additional weapons form only?	YES	NO

Weapon and Shield

Two Weapon

Polearm

Great Weapon

Spear

Authorization Date: \_\_\_\_\_

Authorization for Division \_\_\_\_\_

This authorization was done in accordance to the provisions of the East Kingdom Youth Combat Program. This authorization bout was attended and witnessed by the minor's Legal Custodian/Guardian as witnessed here.

By signing this form the Legal Custodian/Guardian acknowledges that the rules of the Youth Combat Program have been explained and that they give permission for the above stated minor to participate in this program and undergo the authorization process.

They also confirm that all questions were answered to their satisfaction regarding this program before this bout was conducted.

Print Legal Name: \_\_\_\_\_ (Legal Custodian/Guardian)

Sign Legal Name: \_\_\_\_\_ (Legal Custodian/Guardian)

**Tear on dotted line below. Mail top portion to: Linda Meyer 151 Arnold Rd., North Attleboro MA 02760**

**Save this section of the form! This is your only proof of Authorization until your permanent card arrives!**

## Temporary Youth Combat Authorization Card

Legal Name: \_\_\_\_\_

SCA Name: \_\_\_\_\_

Authorizing Marshal I: \_\_\_\_\_

Authorizing Marshal II: \_\_\_\_\_

Authorization Date: \_\_\_\_\_

## Weapon Forms

(check all forms circled on form above)

Weapon and Shield

Two Weapon

Polearm

Great Weapon

Spear

**THIS IS A TEMPORARY CARD**