

Record of Additional Period Fencing Combat Authorization

Fencer's Legal Name: _____
Fencer's SCA Name: _____
City/State/Province: _____
Zip/Postal Code: _____ Authorization Card #: _____
Authorizing Marshal I: _____
Authorizing Marshal II: _____
Today's Authorization Date: _____
Email _____ Phone _____
MOL _____ Event _____

Weapon Forms

(check all current rapier forms)

Light Rapier
Heavy Rapier
Single Rapier
Rigid Parry
Non-Rigid Parry
Dagger
Case of Rapier
Two Handed Rapier
Cut & Thrust
Marshal

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