

Event: _____ Event Date: _____

The Society for Creative Anachronism, Inc. - Kingdom of Atlantia
YOUTH Verification of Authorization & Temporary Authorization Card

This form must be filled out in its entirety for you to receive a Combat Authorization Card.

*** Valid for ninety (90) days from Event Date ***

If the form is illegible or incomplete, it will not be processed.

COMBATANT	PRINT! Youth Legal Name _____
	PRINT! Youth SCA Name _____
	PRINT! Parent Legal Name _____
	PRINT! Parent SCA Name _____
	PRINT! Parent Phone Number _____
	PRINT! Parent AEL Name _____
	PRINT! Parent E-mail and Address: _____
PARENT LEGAL SIGNATURE _____ DATE _____	

***** MoL USE ONLY *****

Circle all of the forms the fighter is authorized in, including new forms. Strike ✕ through all others: Equestrian: GC R L A D Rapier Div 1 Div 2 Div 3

Heavy Div 1 Div 2 (1 Handed) Div 2 (2 Handed) Div 3 (Weapon & Shield)

Heavy Div 3 (Dual Weapon) Div 3 (Great Weapon) Div 3 (Pole Weapon) Div 3 (Spear)

MoL	PRINT! Legal Name _____
	PRINT! SCA Name _____
	PRINT! Phone Number _____
	PRINT! AEL Name _____
	PRINT! E-mail _____
	LEGAL SIGNATURE _____ DATE _____
Marshal	PRINT! Legal Name _____
	PRINT! AEL Name _____ KEM or Appointed Deputy: (Y/N) _____
	LEGAL SIGNATURE _____ DATE _____
Marshal	PRINT! Legal Name _____
	PRINT! AEL Name _____
	LEGAL SIGNATURE _____ DATE _____

Authorization Type:	☐ New ☐ Add-on ☐ Confirm
	☐ Renew ☐ Lost

List New Form(s): _____

MoL USE ONLY	_____	
	Added to Online System	_____