

Æthelmearc Marshal Warrant Form

PLEASE PRINT CLEARLY

New Person _____

Renewal _____

SCA Name _____ Today's Date _____

Modern Name _____

Address _____

City _____ State _____ Zip code _____

Phone number _____ E-mail address _____

Membership Number _____ Membership Expiration Date _____

Heavy Weapons and Combat Archery Marshal _____	Youth Combat Marshal _____
Rapier Marshal _____	Cut and Thrust Marshal _____
Archery Marshal _____	Youth Rapier Marshal _____
Equestrian Marshal _____	Thrown Weapons Marshal _____
	Other _____
	Equestrian Marshal _____

SPECIALTY

Regional Marshal _____ Region _____

Keep this copy for your records – Expires in 60 days

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	Other _____
	Equestrian Marshal _____

SPECIALTY

Regional Marshal _____ Region _____

Did you sign the waiver on the back?

**Regional Marshals must forward the completed form to their Kingdom Superior.
Kingdom Officers must retain the form or archive it with the Authorizations Clerk.**

Instructions

- Fill out both TOP and BOTTOM copies of the REVERSE SIDE COMPLETELY.
 - Warranting requires the signature of a regional or kingdom level marshal.
 - Make sure you include your membership number. **All Marshals must be SCA members per Society law. Warrants will not be processed if this information is missing.**
 - Sign the waiver on the bottom of this page. **YOUR WARRANT IS NOT VALID WITHOUT A SIGNED WAIVER.**
 - Regional marshals must mail this completed form to their Kingdom Superior.
 - The Marshal issuing the new Warrant will immediately create a “Marshal Card” for the new Marshal to carry. Members with Warrants in multiple forms may have the same card updated by the different issuing marshals.
- Please remember: a separate form must be completed for each warrant.**
- All Warrants expire with your membership so keep your membership current at all times. Renewing your authorization card does not renew your Warrant, and renewing your Warrant does not renew your authorization card.
 - If you lose your Warrant card, contact your Regional Marshal(s) for a replacement.
 - Kingdom Marshals shall either retain the bottom form or send it to the Kingdom Authorizations Clerk for archival storage.

SOCIETY FOR CREATIVE ANACHRONISM, INC. CONSENT TO PARTICIPATE AND RELEASE LIABILITY

I, the undersigned, do hereby state that I wish to participate in activities sponsored by the international organization known as the Society for Creative Anachronism, Inc., a California not-for-profit corporation (hereafter “SCA”).

The SCA has rules which govern and may restrict the activities in which I can participate. These rules include, but are not limited to: Corpora, the By-laws, the various kingdom laws, and the Rules for combat related activities.

The SCA makes no representation or claims as to the condition or safety of the land, the structures or surroundings, where or not owned, leased, operated, or maintained by the SCA.

I understand that all activities are VOLUNTARY and that I do not have to participate unless I choose to do so. I understand that these activities are potentially dangerous or harmful to my person or property, and that by participating I voluntarily accept and assume the risk of injury to myself or damage to my property.

I understand that the SCA does NOT provide any insurance coverage for my person or my property. I acknowledge that I am responsible for my safety and my own health care needs, and for the protection of my property.

In exchange for allowing me to participate in these SCA activities and events, I agree to release from liability, agree to indemnify, and hold harmless the SCA, and any SCA agent, office or SCA employee acting within the scope of their duties, for any injury to my person or damage to my property.

This release shall be binding upon myself, successors in interest, and/or any person(s) suing on my behalf.

I have read the statements in this document. I agree with its terms and have voluntarily signed it. I understand that this document is complete unto itself and that any oral promises or representations made to me concerning this document and/or its terms are not binding upon the SCA, its officers, agent and/or employees.

I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT. I HAVE READ AND UNDERSTOOD THIS RELEASE AND I UNDERSTAND ALL ITS TERMS. I EXECUTE IT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS MEANING AND SIGNIFICANCE.

LEGAL NAME (PRINT):

LEGAL NAME (SIGN):

DATE:
