

Ansteorran Marshallate Temporary Authorization Form

Participant: Complete this section only. Please **PRINT** the information in ink. Information **MUST** be legible or card will not be issued.

New Fighter
 Existing Fighter
 Minor

SCA name: _____

Legal name: _____ Branch/Group: _____

(Minors only) Parent's Name: _____ Date of 18th Birthday _____

For Use by Authorizing Marshals ONLY

Type	Authorizing Marshal	Authorization			
Chivalric Combat	_____	<input type="checkbox"/> Armored Combat	<input type="checkbox"/> Armored Combat Marshal	<input type="checkbox"/> Fiberglass Spear	
Rapier Combat	_____	<input type="checkbox"/> Rapier Combat	<input type="checkbox"/> Rapier Combat Marshal		
Missile Combat	_____	<input type="checkbox"/> Armored Missile Combat	<input type="checkbox"/> Rapier Missile Combat	<input type="checkbox"/> Missile Combat Marshal	
Cut & Thrust	_____	<input type="checkbox"/> Cut & Thrust			
Siege Weapon	_____	<input type="checkbox"/> Siege Weapons	<input type="checkbox"/> Siege Marshal		
Non-Combat	_____	<input type="checkbox"/> Target Archery Marshal	<input type="checkbox"/> Thrown Weapons Marshal		
Youth Boffer	_____	<input type="checkbox"/> Youth Boffer (6-9)	<input type="checkbox"/> Youth Boffer (10-12)	<input type="checkbox"/> Youth Boffer (13-15)	
Youth Chivalric	_____	<input type="checkbox"/> Youth Chiv (16-17)			
Youth Chivalric	_____	<input type="checkbox"/> 2 Weapons	<input type="checkbox"/> Spear	<input type="checkbox"/> Weapon and Shield	<input type="checkbox"/> Great Weapon
Youth Rapier	_____	<input type="checkbox"/> Foil	<input type="checkbox"/> Epee	<input type="checkbox"/> Heavy Rapier	<input type="checkbox"/> Plastic Sword
Youth Rapier	_____	<input type="checkbox"/> Melees	<input type="checkbox"/> Defensive Secondaries	<input type="checkbox"/> Offensive Secondaries	

Issue Date: _____ Expiration Date (not more than 30 days after issue date): _____

Note: No temporary authorizations may be issued for marshals of youth combat activities.