APPLICATION FOR EAST KINGDOM EQUESTRIAN AUTHORIZATION CARD

	APPLICANT IN	IFORMATION	
Legal Name (Print):		Phone: ()	
SCA Name (Print):		Date of Birth:	
Mailing Address:			
Email Address:	SCA Membership # (if applicable)		
	AUTHORIZATION	INFORMATION	
Authorizing Marshal 1 Print SCA Name:	Sig	ın Legal Name:	
Authorizing Marshal 2			
Please circle all authorization	levels that should appear o	n the Authorization Card:	
REGULAR AUTHORIZATIONS:	General Riding	Mounted Games	Driving
SPECIAL AUTHORIZATIONS:	Mounted Archery	Mounted Crest Combat	Jousting
Authorization Date:	Membership #	nbership # Membership Exp date:	
Tear on dotted line below. Ma	AUTHORIZATION N	MAY TAKE PLACE. : Matt Cross: 355 Merriam Hill	
		of of Authorization. A roster KEO if you have any questi	will be kept with your
This is not an authoriza	Proof of Au tion card. Equestrian Authoriza	thorization tions are rostered by the Kingd	om Equestrian Officer.
Legal Name:			
SCA Name:			
Authorizing Marshal I:			
Authorizing Marshal II:			
Authorization Date:			
	Authorizati		
General Riding Mounted Games Driving		Mounted Archery Mounted Combat (Cre Jousting	□ st) □