SOCIETY FOR CREATIVE ANACHRONISMS, INC. EAST KINGDOM EQUESTRIAN EVENT REPORT FORM

(please type or print clearly)

Name of Event			Date(s) of Event			
Physical Location o	f Event					
Mailing Address (if						
Eques. Autocrat						
SC		Mundane name				
Phone						
Eques. Marshal						
SC Phone	SCA name			dane name		
Please answer the fo	ollowing					
1). How many hors	ne event	rent How many were rentals				
			How many riders participated			
2). What activities	were perforn	ned? (circle all	that apply)			
Quintain	Rings	Tentpegg	ing	Saracen Heads		
Procession	Quest	Picnic	Mazes	Dressage		
Other		_				
3). Were there any If yes, please do	•		-	? YES	NO	
4). Was this event l	held for Equa	es. activities o	nly or was it	held with other S	SCA	
activities (ie. heavy	weapons cor	nbat, fencing,	archery, A&	&S, etc.)?		
5). Please comment be used to benefit or						
		suiociais				

(*) If an Eques. related injury has occured please call the E.K. Marshal or Mistress of Horse and submit an "Eques. Incident Report" to same.