

YOUTH COMBAT PROGRAM FIGHTER AUTHORIZATION FORM

Youth SCA Name: _____ Date of Birth: _____

Youth Mundane Name: _____

Parent/Legal Guardian SCA Name: _____

Parent/Legal Guardian Mundane Name: _____

Address: _____

City: _____ State: _____ Zip-code: _____

Phone Number: (____) - ____ - _____ E-mail: _____

SCA Group: _____

Youth SCA Member Number: _____ Expiration Date: _____

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Activity Observed: (circle one) Event / Practice / Demo          Date: \_\_\_\_\_

Location: \_\_\_\_\_

## Age Division/Authorizations

### ARMORED

\_\_\_\_\_ Division I Armored (6-9 yr olds)          \_\_\_\_\_ Division II Armored (10-13 yr olds)

\_\_\_\_\_ Division III Armored (14-17 yr olds)          \_\_\_\_\_ Div III Armored Great Weapons

\_\_\_\_\_ Adult-Lev Armored (16-17 yr olds) – Mark of open yellow diamond on helm

w/Permission of Crown, Kingdom Youth Armored Marshal & Parent

### RAPIER

\_\_\_\_\_ Youth Rapier Basic (14-17 yr olds)          \_\_\_\_\_ Youth Rapier Limited Adv - Rigid

\_\_\_\_\_ Adult Basic Rapier (16-17 yr olds) – Mark of open yellow diamond on back of glove

w/Permission of Crown, Kingdom Youth Rapier Marshal & Parent

\_\_\_\_\_ Adult Adv Rapier (16-17 yr olds) – Mark of open yellow diamond on back of glove

w/Permission of Crown, Kingdom Youth Rapier Marshal & Parent

**COMMENTS**

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**Signatures:**

**Observing Youth Authorizing Marshal:** \_\_\_\_\_

**Local SCA Group:** \_\_\_\_\_

**Parent/Legal Guardian:** \_\_\_\_\_

**Kingdom Youth Marshal (if authorizing to fight at adult level):** \_\_\_\_\_

**Current Crown (if authorizing to fight at adult level):** \_\_\_\_\_