

**YOUTH COMBAT PROGRAM
WARRANT REQUEST FORM - NEW MARSHAL**

SCA Name: _____

Mundane Name: _____

Address: _____

City: _____ **State:** _____ **Zip-code:** _____

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

SCA Group: _____

SCA Member Number: _____ **Expiration Date:** _____

Background Check Expiration Date _____

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

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

**Marshal Requirements:**

- \_\_\_\_\_ **Attended Marshal training seminar (Marshal 101) – How to be a marshal**
- \_\_\_\_\_ **Attended Marshal training seminar (Marshal 102) – How to authorize fighters**
- \_\_\_\_\_ **Demonstrates knowledge of applicable youth rules**
- \_\_\_\_\_ **Understands legal ramifications of youth combat**
- \_\_\_\_\_ **Understands paperwork and reporting requirements for youth combat**
- \_\_\_\_\_ **Understands armor/weapon/calibration standards for each age division**
- \_\_\_\_\_ **Demonstrates proper armor/weapon inspections for fighters**
- \_\_\_\_\_ **Understands the difference between sparring and conducting drills**
- \_\_\_\_\_ **Understands who can/cannot spar with youth combatants**
- \_\_\_\_\_ **Understands proper marking & permissions required for youth fighting at adult level**
- \_\_\_\_\_ **Observed or conducted under supervision an actual or mock authorization process**

**Warrant Requested For:**

\_\_\_\_\_ **Group Youth Armored Combat Authorization Marshal**

\_\_\_\_\_ **Youth Armored Combat Authorization Marshal-At-Large**

\_\_\_\_\_ **Youth Armored Combat Non-Authorization Marshal**

\_\_\_\_\_ **Group Youth Rapier Authorization Marshal**

\_\_\_\_\_ **Youth Rapier Authorization Marshal-At-Large**

\_\_\_\_\_ **Youth Rapier Non-Authorization Marshal**

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COMMENTS

Signature of Approving Kingdom Youth Marshal: _____