

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: _____

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

Location: _____

Age Division/Authorizations

ARMORED

_____ Div I Armored (6-9 yrs old)

_____ Div II Armored (10-13 yrs old)

_____ Div III Armored (14-17 yrs old)

_____ Div III (14-17 yrs olds) 2-H Weapons

_____ Div III Adult Armored Rattan (16-17 yrs old) – Mark of open yellow diamond on helm
w/Permission of Parent, Authorizing Youth Armored Marshal & either DEMYC or KEM

RAPIER

_____ Div I Youth Rapier (6-9 yrs old)

_____ Div II Youth Rapier (10-13 yrs old)

_____ Div III Youth Rapier Basic (14-17 yrs old)

_____ Div III Youth Rapier Limited Adv - Rigid Parry (14-17 yrs old)

_____ Div III Adult Basic Rapier (16-17 yrs old) – Mark of open yellow diamond on back of glove
w/Permission of Parent, Authorizing Youth Rapier Marshal & either DEMYC or KEM

_____ Div III Adult Adv Rapier (16-17 yrs old) – Mark of open yellow diamond on back of glove
w/Permission of Parent, Authorizing Youth Rapier Marshal & either DEMYC or KEM

COMMENTS

Signatures:

Parent/Legal Guardian: _____

Youth Authorizing Marshal: _____

Local SCA Group: _____

DEMYC or KEM (if authorizing to fight at adult level): _____