Please email this form, a copy of the event flyer, and a copy of your refund policy to: <a href="mailto:EVENTS@SCA.ORG">EVENTS@SCA.ORG</a> and cc your Kingdom Exchequer.

### REQUIRED CONTACT INFORMATION (RED BOXES ARE REQUIRED)

EVENT NAME:  GROUP NAME:  KINGDOM:	EVENT DATE	:			
EVENT SITE  NAME: ADDRESS: CITY:	ST:	ZIP:			
RESERVATIONIST  LEGAL NAME: EMAIL:	PHONE #:				
EVENT STEWARD  LEGAL NAME: EMAIL:	PHONE #:				
GROUP SENESCHAL  LEGAL NAME: EMAIL:	PHONE #:				
GROUP EXCHEQUER  LEGAL NAME: EMAIL:	PHONE #:	PHONE #:			
MAILING ADDRESS OF WHERE TO SEND THE CHECK AFTER REGISTRATION IS CLOSED					
NAME:					
ADDRESS: CITY:	ST:	ZIP:			

# PLEASE FILL IN THE BOXES THAT APPLY TO YOUR EVENT.

# There will be a \$5.00 member discount applied to adult members.

Date to open registrations online

Date to close registrations online

Will you offer early reg	istration disc	counts?	Y	es	No		
If you, do how much of			Adult		Child		
Date to close early reg	_		Addit		Cilia		
				D. L.	VA/ 1		
<u>SITE FEES</u>				Daytrip	Weeker	nd	
<b>.</b>	No	nmember					
Child age range		Child ra					
Child age range		Child ra					
Child age range		Child ra					
	Family cap -		-				
	amily cap - s						
Family ca	ap - site, feas	st, & lodgii	ng				
<u>LODGING</u>							
ITEM		<u>Cost</u>	<u>t</u> <u>L</u>	imit #	If you want to		
Cabin Top Bunk per ni	ght				names and/or	-	
Cabin Bottom Bunk per night cabin, please include that information						•	
Cabin Top Bunk weekend on the comments page or as a separate attachment. The same goes for a list of						*	
Cabin Bottom Bunk weekend camp group names.						<i>y</i>	
Tent Camping (Primative) per night							
Tent Camping (Primative) Weekend							
Tent Camping (Electric)	) per night						
Tent Camping (Electric)	) weekend						<u>COST</u>
RV Camping per night					RV Electric He	ookup	
RV Camping weekend					RV Electric He	ookup	
Horse Stall per night					Stall Electric I	Hookup	
Horse Stall weekend					Stall Electric I	Hookup	
<u>FOOD</u>							
<u>ITEM</u>	COST	<u>LIMIT</u>			ITEM	Cost	Limit #
Friday Feast				Sunda	ay Breakfast		
Saturday Breakfast					ay Lunch		
Saturday Lunch					ay Feast		
Saturday Feast					,		

#### AUTHORIZATION REQUEST TO USE THE SCA ONLINE REGISTRATION AND EVENT SYSTEM (S.C.O.R.E.S.)

ENT STAFF COMP LI Modern Name	SCA Nan	ne	Event Sta	ff Role	Membe	r #, if Availabl	
						,	
•		<del>-</del>					
YALTY COMP LIST							
Legal Name		SCA Na		Jame W		Which Kingdom Royalty	
J					<b>J</b>	, ,	
additional information	you need us to	know, pleas	se fill in here.				
additional information	you need us to	know, pleas	se fill in here.				
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additional information	you need us to	know, pleas	se fill in here.				

#### AUTHORIZATION REQUEST TO USE THE SCA ONLINE REGISTRATION AND EVENT SYSTEM (S.C.O.R.E.S.)

The Financial committee of the local group needs to verify that the local group is supportive of using the SCA Online Reservation System and that the revenue received will be minus at a maximum, the following fees.

1% flat fee for use of SCORES (Maximum \$400)
2.9% plus \$.30 per transaction via Visa, MasterCard, and Discover
3.9% plus \$.30 per transaction via American Express
1% plus \$1.00 per E-check
2.4% per transaction via PayPal

Date of approval by the Fina	ncial Committee:			
Seneschal (Legal Name:	NT		Signature	
Please email all four pages of EVENTS@SCA.ORG and to y		• •	•	nsoring group to
Please add your event web I	ink:			
KINGDOM OFFICE USE ONLY				
Approved by Kingdom Excheque				
Exchequer (Legal Name): Print			Signature	
CORPORATE OFFICE USE ONLY				
Approved by Corporate Exchequ	er on:			
Exchequer (Legal Name):			Signature	