

Marshal Report Form

This form is primarily used for marshals reporting on combat at and SCA event or practice. Anyone may submit a report regarding an incident Aethelmearc combat via this form.

SCA Name: _____

Real Name: _____

Event: _____

Group: _____

Minster of the List (MOL): _____

Marshal in Charge (MIC): _____

Email Address: _____

Date (MM/DD/YYYY): _____

Disciplines:

Combat Archery

Siege

Equestrian

Armored

Youth Armored

Target Archery

Rapier

Youth Rapier

Thrown Weapons

Other Marshals:

Authorizations: _____

Description of Activities:

Description of Injuries:

Problems:

