Kingdom of Avacal

DATE RESERVATION / EVENT INFORMATION

Completed forms are to be sent to the current Kingdom Calendar Officer at calendar@avacal.org

Do *not* send this form to the Avantgarde

Date Reservation Form (DRF): FILL OUT SECTION A ONLY

TO RESERVE A DATE BEFORE ALL EVENT INFORMATION IS KNOWN (EVENT STEWARD OR SITE INFORMATION) MUST BE SIGNED OR BOX CHECKED BY THE WARRANTED SENESCHAL OF THE SPONSORING BRANCH.

Event Information Form (IEF): FILL OUT SECTIONS A *AND* B

THIS IS THE OFFICIAL REGISTRATION OF YOUR EVENT. AVANTGARDE EVENT COPY (IF APPLICABLE FOR THIS EVENT CANNOT BE SUBMITTED TO THE AVANTGARDE WITHOUT THIS COMPLETE FORM. SECTION A MUST BE SIGNED OR BOX CHECKED BY THE WARRANTED SENESCHAL OF THE SPONSORING BRANCH; SECTION B MUST BE SIGNED OR BOX CHECKED BY THE EVENT STEWARD OR THUA CHANCELLOR (WHO MUST BE AN SCA MEMBER). FORMS CAN BE SENT BY REGULAR MAIL, SCANED TO PDF AND EMAILED AS AN ATTACHMENT, OR AS A FILLED AND SAVED PDF ATTACHMENT

EVENT INFORMATION FORMS (EIFs - SECTIONS A *AND* B), BARRING UNFORSEEN AND UNUSUAL CIRCUMSTANCES, SHOULD BE IN THE HANDS OF THE KINGDOM CALENDAR OFFICER NO LESS THAN THREE (3) MONTHS BEFORE AN EVENT IS TO TAKE PLACE

A

NAME OF EVENT	DATE FROM (MM/DD/YYYY)	DATE TO (MM/DD/YYYY)

RESPONSIBLE BRANCH	INCIPIENT BRANCH OR WHERE EVENT WILL BE HELD (IF NOT RESP. BRANCH)

EVENT LEVEL

LEVEL 1 - LIMITED (formerly known as Tier 1)		**NO CONFLICT PERMITTED**
☐	CROWN EVENTS (Crown Tournaments and Coronations, Avacal/Tir Righ War, Crown Council)	For additional information: www.avacal.org/offices/seneschalate/calendarpolicyjune2014.pdf
☐	OTHER EVENTS (Branch Primary Events, Events of Regional or Kingdom Interest)	
LEVEL 2 - OPEN (Formerly known as Tier 2)		
☐	BRANCH EVENTS (No Kingdom business is expected to be conducted)	

WARRANTED SENESCHAL OF BRANCH RESPONSIBLE (SCA NAME)	WARRANTED SENESCHAL OF BRANCH RESPONSIBLE (LEGAL NAME)		
ADDRESS OF SENESCHAL	CITY	PROVINCE	POSTAL CODE
EMAIL ADDRESS OF SENESCHAL	CONTACT NUMBERS (INCLUDE AREA CODE)		
MODERN SIGNATURE OF SENESCHAL OF BRANCH RESPONSIBLE (SCA NAME)	***OR*** FOR USE ONLY WITH PDF ATTACHMENT TO EMAIL SUBMISSION		
	☐ BY CHECKING THIS BOX YOU AFFIRM THAT YOU ARE THE WARRANTED SENESCHAL OF THE SPONSORING BRANCH AND YOU ACKNOWLEDGE THAT YOU TAKE RESPONSIBILITY FOR THIS EVENT IN THE SAME MANNER AS IF YOU HAD SIGNED THIS FORM.		

B

SITE NAME	TIME EVENT STARTS	TIME EVENT ENDS	
COMPLETE SITE ADDRESS (ENTER "NSA" IF THERE IS NOT STREET ADDRESS	CITY	PROVINCE	POSTAL CODE
EVENT STEWARD OR THUA CHANCELLOR (SCA NAME)	EVENT STEWARD OR THUA CHANCELLOR (LEGAL NAME)		
ADDRESS OF EVENT STEWARD OR THUA CHANCELLOR	CITY	PROVINCE	POSTAL CODE
EMAIL ADDRESS OF EVENT STEWARD OR THUA CHANCELLOR	CONTACT NUMBERS (INCLUDE AREA CODE)		
DO YOU GIVE PERMISSION TO PLACE YOUR NAME, ADDRESS, PHONE NUMBER, AND EMAIL ON A WEB PAGE (KINGDOM OR OTHER BRANCHES)? ☐ YES ☐ NO	IF NO, CAN YOUR SCA NAME AND EMAIL ONLY BE PUBLISHED ON WEB PAGES? ☐ YES ☐ NO		
EVENT WEBSITE ADDRESS (IF APPLICABLE)	SCA MEMBERSHIP NUMBER	EXPIRY DATE	
MODERN SIGNATURE OF SENESCHAL OF BRANCH RESPONSIBLE (SCA NAME)	***OR*** FOR USE ONLY WITH PDF ATTACHMENT TO EMAIL SUBMISSION		
	☐ BY CHECKING THIS BOX YOU AFFIRM THAT YOU ARE THE WARRANTED SENESCHAL OF THE SPONSORING BRANCH AND YOU ACKNOWLEDGE THAT YOU TAKE RESPONSIBILITY FOR THIS EVENT IN THE SAME MANNER AS IF YOU HAD SIGNED THIS FORM.		