



The following form is to be filled out and mailed or emailed to the Kingdom Equestrian Officer within 10 business days after an event, demo or practice at which equestrian activities have taken place. The information contained will be used to keep the Society informed as to the activity level of horses in the kingdom and hence the Society. Send the completed form to the Kingdom Equestrian Marshal: <http://equestrian.antir.sca.org/officers.html>

NAME OF EVENT			SPONSORING BRANCH			DATE(S) OF EVENT			
SCA NAME OF EVENT STEWARD			LEGAL NAME OF EVENT STEWARD			PHONE NUMBER			
SCA NAME OF EQUESTRIAN MARSHAL IN CHARGE			LEGAL NAME OF EQUESTRIAN MARSHAL IN CHARGE			PHONE NUMBER			
EMAIL ADDRESS OF EVENT STEWARD			EMAIL ADDRESS OF EQUESTRIAN MIC			MODERN LOCATION OF EVENT			
# OF RIDERS	TOTAL # OF HORSES	# OF RENTALS	TOTAL GATE ATTENDANCE			<input type="checkbox"/> A COPY OF THE WAIVER SUBMISSION COVER FORM IS ATTACHED (AN TIR #24), AND ORIGINALS OF ALL SIGNED EQUESTRIAN WAIVERS HAVE BEEN SENT TO THE KINGDOM WAIVER SECRETARY AT <a href="http://www.antir.sca.org/Offices/index.php?expand=Seneschal#seneschal">http://www.antir.sca.org/Offices/index.php?expand=Seneschal#seneschal</a>			
<input type="checkbox"/> AN ACCIDENT/INCIDENT HAPPENED AT THIS EVENT. THE KINGDOM EQUESTRIAN MARSHAL WAS NOTIFIED AND THE INCIDENT REPORT (AN TIR #35) HAS BEEN SENT. FOR RIDER INJURIES THE KINGDOM SENESCHAL MUST ALSO BE INFORMED.									
EQUESTRIAN ACTIVITIES THAT OCCURRED AT THIS EVENT									
<input type="checkbox"/> GENERAL RIDING <input type="checkbox"/> MOUNTED GAMING <input type="checkbox"/> MOUNTED ARCHERY <input type="checkbox"/> CREST COMBAT <input type="checkbox"/> FOAM-TIPPED JOUSTING <input type="checkbox"/> MOUNTED HEAVY COMBAT <input type="checkbox"/> DRIVING <input type="checkbox"/> EXPERIMENTAL - DESCRIBE BELOW									
COMMENTS/ADDITIONAL NOTES ABOUT THIS EVENT (IF ANY)									
<b>IF SUBMITTING THIS FORM IN PERSON OR BY MAIL, SIGN BELOW</b>					<b>IF SUBMITTING THIS FORM BY EMAIL, CHECK THE BOX BELOW</b>				
LEGAL SIGNATURE OF EQUESTRIAN MARSHAL IN CHARGE					<b>OR</b>	<input type="checkbox"/> BY CHECKING THIS BOX YOU AFFIRM THAT YOU ARE THE EQUESTRIAN MARSHAL IN CHARGE AND YOU ACKNOWLEDGE THAT YOU TAKE RESPONSIBILITY FOR THIS EVENT IN THE SAME MANNER AS IF YOU HAD SIGNED THIS FORM.			
PARTICIPANT'S SCA NAME					ADULT/MINOR		ACTIVITY DONE TODAY		
1					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
2					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
3					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
4					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
5					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
6					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
7					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL
8					<input type="checkbox"/> ADULT	<input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER	<input type="checkbox"/> GROUND CREW	<input type="checkbox"/> MARSHAL

PARTICIPANT'S NAME		ADULT/YOUTH	ACTIVITY DONE TODAY
9		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
10		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
11		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
12		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
13		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
14		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
15		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
16		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
17		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
18		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
19		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
20		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
21		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
22		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
23		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
24		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
25		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
26		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
27		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
28		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
29		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
30		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
31		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
32		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
33		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
34		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL
35		<input type="checkbox"/> ADULT <input type="checkbox"/> MINOR	<input type="checkbox"/> RIDER <input type="checkbox"/> GROUND CREW <input type="checkbox"/> MARSHAL