

### EVENT STEWARD AWARENESS FORM

INITIALS	DESCRIPTION
_____	I am aware that only the seneschal may sign contracts on the barony's behalf.
_____	I am aware that I must prepare a budget before the event.
_____	I am aware that I must submit a financial report after the event.
_____	I am aware that no funds will be distributed to anyone for this event unless I, the head chef, or co-steward, expressly approve the amount.
_____	I am aware that all re-imbursements require receipts.
_____	I am aware that all bills from outside vendors are to be sent to the baronial mailing address which can be obtained from the seneschal and/or exchequer.
_____	I am aware that if SCA insurance is required that it must be requested at least thirty days in advance and that the barony, with few exceptions, will not re-imburse a late fee.
_____	I am aware that I am to submit a post-mortem on the event that includes what went right, what went wrong, and ways to improve the event.
_____	I am aware that all money that comes in for the event must be given to the exchequer or seneschal by the next populace meeting and that the money must be given in the same form in which it was received (e.g. cash must be given as cash, checks as checks, etc.)
_____	I am aware that the barony cannot <i>distribute</i> funds electronically.
_____	I am aware that the Aceps site is the only approved site for <i>accepting</i> funds electronically and that if I wish to use Aceps (which is encouraged but not required) that I must meet their requirements.
_____	I am aware of all deadlines for SCA publications.
_____	I am aware that if childrens activities are to be advertised and held, that there are policies for youth activites to which must be adhered.
_____	I am aware that all martial activities must have an appropriate marshal present.
_____	I am aware that non-member surcharges (NMS Fees) must be collected when fees are charged and that these fees cannot be waived for any non-members.

**EVENT NAME:** \_\_\_\_\_ **EVENT DATE:** \_\_\_\_\_

**SIGNATURE (SCA):** \_\_\_\_\_ **MEMBERSHIP #:** \_\_\_\_\_

**SIGNATURE (LEGAL):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# Kingdom of the Outlands

## Event Registration Form

Updated 1/16/11, A.S. XLV

Please mail or email this completed form to the Kingdom Event Coordinator: Ekaterina Demetriou c/o Kat Brandow, 1806 Lorca Dr #83, Santa Fe, NM 87505 or kingdomcalendar@outlands.org. Make sure to also send a copy of this form to the Kingdom Chronicler, along with your event article, if your event is to be published in the *Outlandish Herald*.

Event Name:

SCA Branch:  City:

Site opens (day/time):  Site closes (day/time):

Name and address of site:

Clear Directions:

Site Amenities & Restrictions:

We plan to publish in the *Outlandish Herald*:  Yes  No

If yes, please read and initial the following statement: I have read the article guidelines, available from any seneschal or chronicler, and understand that deadlines will need to be met, and all required event information must be in the event article to ensure that the article will be published.

**ALL** event announcements should be submitted electronically. Please do not use any special formatting or fonts when submitting event announcements. The Chronicler reserves the right to edit for content, length and formatting

Explain the importance and scope of this event:

Name and address of nearest medical facility:

Distance to site (in miles):  Does the site allow alcohol? No

### Autocrat

SCA Name (print):  Member #:  Expiration:

Legal Name (print):  Email:

Address:  Phone:

Signature (legal name): \_\_\_\_\_

### Seneschal

SCA Name (print):  Legal name (print):

Signature (legal name): \_\_\_\_\_

### Baron/Baroness/2nd Officer

SCA Name (print):  Legal name (print):

Signature (legal name): \_\_\_\_\_

# Barony of Caerthe Request for Funds

Please Print Clearly

Date: \_\_\_\_\_  
Requested by (SCA name): \_\_\_\_\_  
Legal Name: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Pay to the Order of: \_\_\_\_\_  
Amount Requested: \$ \_\_\_\_\_  
Event Name and Date  
(if applicable): \_\_\_\_\_

**PLEASE ATTACH ALL RELEVANT RECEIPTS TO THE BACK OF THE  
FORM AND RETURN TO THE EXCHEQUER.**

Purpose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that I am required to submit receipts to document any advance or reimbursement, and that all advanced funds not accounted for by receipts must be returned to the Exchequer.

\_\_\_\_\_  
Requestor Signature (Legal Name) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Request for funds is granted.  
Check Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
Funds to be allocated from: \_\_\_\_\_

\_\_\_\_\_  
Request for funds is denied.  
Explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
1<sup>st</sup> Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ 2<sup>nd</sup> Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*NOT NEGOTIABLE\*\*\*\*NOT NEGOTIABLE\*\*\*\*NOT NEGOTIABLE\*\*\*\*NOT NEGOTIABLE\*\***

Total Spent: \$ \_\_\_\_\_ Attached Receipts: \$ \_\_\_\_\_ Returned to Exchequer: \$ \_\_\_\_\_ Date: \_\_\_\_\_

**SCA INSURANCE FORM BLANK**

(Mail with check from barony made out to SCA Inc. for \$50.00  
to SCA, Inc., P.O. Box 360789, Milpitas, CA 95036-0789)

- 1) EVENT NAME:
- 2) Name and Physical Address of Site:
- 3) Date and times of event:
- 4) Certificate Holder's Name and Address:
- 5) Additional Insured: (Given by Site)
- 6) Fax Number of Holder:
- 7) Routing Name for Fax:
- 8) Event Coordinator:
- 9) Insurance Type:

**SCA INSURANCE FORM EXAMPLE**

- 1) EVENT NAME: **Caerthe Twelfth Night**
- 2) Name and Physical Address of Site:  
**Adams County Regional Park**  
**9755 Henderson, RD, Brighton, CO 80601**
- 3) Date and times of event: **Saturday 01/07/2012 8AM - Saturday 01/07/2012 11PM**
- 4) Certificate Holder's Name and Address:  
**Adams County Parks and Community Resources**  
**Adams County Regional Park**  
**9755 Henderson Road**  
**Brighton, CO 80601**
- 5) Additional Insured: **Adams County**
- 6) Fax Number of Holder: **303-637-8015**
- 7) Routing Name for Fax: **Roxie Elliott**
- 8) Event Coordinator:  
**Member Mundane Name**  
**Member Mundane Address**  
**Member Phone Number**
- 9) Insurance Type: **General Liability**

**EVENT STAFF**

(Not all may be applicable;

Default person to contact is the baronial officer)

Event Steward: \_\_\_\_\_

Co-event Steward: \_\_\_\_\_

Head Chef: \_\_\_\_\_

Head Gatekeeper: \_\_\_\_\_

Gatebook Designer: \_\_\_\_\_

Adveristing/Flyers: \_\_\_\_\_

Site Token Maker: \_\_\_\_\_

Webminister: \_\_\_\_\_

Royal Liason: \_\_\_\_\_

Merchant Co-ord: \_\_\_\_\_

Head Server: \_\_\_\_\_

Youth Officer: \_\_\_\_\_

Knight Marshal: \_\_\_\_\_

Rapier Marshal: \_\_\_\_\_

Archery Marshal: \_\_\_\_\_

Thrown Weapons Marshal: \_\_\_\_\_

A&S Co-ord: \_\_\_\_\_

Decorations: \_\_\_\_\_

Setup Crew: \_\_\_\_\_

Cleanup Crew: \_\_\_\_\_

Head Chef Helpers: \_\_\_\_\_

Crash Space/Hospitality : \_\_\_\_\_

Media Liason (else seneschal) : \_\_\_\_\_

Chirurgion: \_\_\_\_\_

Event Specific #1: \_\_\_\_\_

Event Specific #2: \_\_\_\_\_



## EVENT STEWARD CHECKLIST

COMPLETE?	ITEM	DUE
<input type="checkbox"/>	Event Request Form Complete	Immediately
<input type="checkbox"/>	Site Contract Signed by Seneschal	Immediately
<input type="checkbox"/>	Event Steward Awareness Form Completed	Immediately
<input type="checkbox"/>	Budget Submitted	Immediately
<input type="checkbox"/>	Accepts Form Completed (if applicable)	ASAP
<input type="checkbox"/>	Staff Selected	ASAP
<input type="checkbox"/>	Ordered Port-a-lets (if applicable)	ASAP
<input type="checkbox"/>	Site Specific Form Completed (e.g. setup form)	As directed by site
<input type="checkbox"/>	Advertising	As Appropriate
<input type="checkbox"/>	Honoraria obtained	As Appropriate
<input type="checkbox"/>	Fortress Article Sent in	60 days Before Event
<input type="checkbox"/>	OH Article Sent in	60 days before event
<input type="checkbox"/>	SCA Insurance Check Requested	60 Days before event
<input type="checkbox"/>	SCA Form and Check Sent to Corporate	40 days before event
<input type="checkbox"/>	Gate Paperwork is ready	1 Week before event
<input type="checkbox"/>	Purchase Port-a-let items or other necessities	1 Week before event
<input type="checkbox"/>	Site keys obtained	Day before event or as directed by site
<input type="checkbox"/>	Gate Money Turned Over to Exchequer	At event or ASAP thereafter
<input type="checkbox"/>	Thank You	ASAP after Event
<input type="checkbox"/>	NMS Check Sent to Kingdom	10 Days after event
<input type="checkbox"/>	Waivers given to seneschal or sent to waiver secretary	Next populace meeting
<input type="checkbox"/>	Post-Event Report	Thirty days after event
<input type="checkbox"/>	Final Financial Report	Thirty days after event

## POST-EVENT REPORT

<b>POST-EVENT REPORT</b>	
Event Name:	
Event Date(s):	
Total Attendees:	
Total Adult Members:	
Total Adult Non-Members:	
Total Child Members:	
Total Child Non-Members:	
Total Profit/Loss (Must Finish Financial Report):	
Competition Winners (if applicable):	
Still Open Items or Bills:	
What Went well?:	
What Went wrong?:	
Future suggestions:	
Other Noteworthy Items:	

## IMPORTANT SITE URLS AND CONTACTS

**ACCEPS** (The Correct Form for Aceps can be found at the website)

WEBSITE: [http://aceps.ansteorra.org/aceps\\_info.php](http://aceps.ansteorra.org/aceps_info.php)

EMAIL: [aceps@gmail.com](mailto:aceps@gmail.com)

**Kingdom Event Packet:**

<http://www.outlands.org/portals/0/forms%20and%20waivers/eventpacket-0111.pdf>

**Kingdom Chronicler** (for getting the event in the *Outlandish Herald*):

[chronicler@outlands.org](mailto:chronicler@outlands.org)

**Kingdom Calendar** (for getting the event on the kingdom website):

[calendar@outlands.org](mailto:calendar@outlands.org)

**Baronial Chronicler** (for getting the event in the *Fortress*)

[chronicler@caerthe-sca.org](mailto:chronicler@caerthe-sca.org)

**Baronial Webminister** (for getting a webpage up)

[web@caerthe-sca.org](mailto:web@caerthe-sca.org)

**Barony Documents:**

[http://www.caerthe-sca.org/docs/Request\\_For\\_Funds.pdf](http://www.caerthe-sca.org/docs/Request_For_Funds.pdf)

[http://www.caerthe-sca.org/docs/EventFinancialReport\\_95.xls](http://www.caerthe-sca.org/docs/EventFinancialReport_95.xls)