Kingdom of the Outlands

Kingdom Event Proposal

Crown Tournament Spring Fall	Coronation Spring Fall Arts & Sciences Competition	
StagsCon [Other	
SCA Branch:		
City:	State:	
Site Opens (m/dd/yy h:mm):	Site Closes (m/dd/yy h:mm):	
Modern Name and Address of Site:		
Initial that you have attached the follow	ing to this form:	
A site description detailing the am	enities the site has to offer (with pictures if available)	
A proposed preliminary schedule and description of any extra planned activities		
A proposed preliminary budget detailing the estimated costs and expenses		
A preliminary staff list to include experience of the event stewards		
The first month's article for the Outlandish Herald (Please, include Site Amenities/Restrictions and		
Directions in article.)		
Name and address of nearest medical facility:		
	Distance from site:	
(:	Signatures on second page)	

Kingdom of the Outlands

Event Steward name:	Date:	
Membership #:	Expiration:	
Address:		
Phone: Email address:		
** By signing as the Event Steward, I acknowledge that I have volunteered to be the Event Steward. If the event announcement will be published, I have read the Outlandish Herald 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 insure that the article will be published. If I am unable to fulfill my duties as Event Steward, I am responsible to let the local seneschal know, so they can prepare another Event Steward to fill the position.		
Legal name (print):	Signature:	
	Date:	
** By signing as the local seneschal, I acknowledge that I am legally responsible for the event and understand that all contracts must be signed by the Seneschal unless the Event Steward is specifically warranted to do so. It is my duty to make sure the Event Steward is a current, paid member at the time of the event. If the Event Steward is unable to fulfill their duties I am responsible to fill the position with another Event Steward.		
I hereby warrant the above Event Steward to sign contracts in the name of the local SCA group for the purpose of this event.		
I do NOT warrant the above Event Steward to sign contracts in the name of the local SCA group. All contracts for this event must be signed by the Seneschal.		
	_ Signature:	
	Date:	
** By signing as Baronial Seneschal, I acknowledge that I share legally responsibility for the event and understand that all contracts must be signed by a Seneschal unless the Event Steward is specifically warranted to do so.		
Legal name (print):	Signature:	
Second Officer name (if a Shire) / Coronet (if in a Barony):	Date:	
** By signing, I acknowledge that the event has been proposed to be held by the populace.		
Legal name (print):	Signature:	
If approved, this form will act as the Event Registration Form		