Caid Authorization Form Unarmored Combat Only

For Unarmored Combat: Passed armor inspection				
			(Initials)	(Date)
Identified target areas		(Initials)	(Date)	
Demonstrated 3 period cuts a	and two per	(Initials)	(Date)	
Demonstrated 3 period cuts a	and two per	(Initials)	(Date)	
Successfully sparred with Tes	st Fighter	(Initials)	(Date)	
Properly demonstrated appro	priate Tour	(Initials)	(Date)	
		marshal may indicate that more practices are needed.	(initials)	(Suite)
Practice Location	Date	Marshal or Trainer Printed Name and Signature		
For Warranted Unarmored	Combat N	larshals -		
Verified SCA Membership			(Initials)	(Date)
Answered questions correctly	, including	(Initials)	(Date)	
Conducted armor inspection	correctly	(Initials)	(Date)	
Conducted weapons inspection	on correctly	(Initials)	(Date)	
Aware of dangers on the field	l and can ev	(Initials)	(Date)	
Can project commands, and t	ake control	(Initials)		
For Senior Unarmored Con	nbat Mars	nals -	(muais)	(Date)

(Initials)

(Date)

Successfully ran a Fighter Authorization