

## Request for Extended Grace Period for Filing Waiver Materials

**Caution: This form applies to a single event or fighter practice quarter.**

Fill Out **Either** the Event Information Section **Or** the Fighter Practice Information Sections  
**And** the Seneschal Information Section.

### Event Information

**Event Name**

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**Event Date**

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**Hosting Group**

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### Fighter Practices/Marshal Information

**Quarter, Year**

1<sup>st</sup> = January 1 - March 31

2<sup>nd</sup> = April 1 - June 30

3<sup>rd</sup> = July 1 - September 30

4<sup>th</sup> = October 1<sup>st</sup> - December 31

**Hosting Group**

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**Legal Name**

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**SCA Name**

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**Street Address**

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**City, State Zip**

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**Phone (Specify Day or Night)**

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**E-mail Address**

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### Seneschal Information

**Legal Name**

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**SCA Name**

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**Street Address**

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**City, State Zip**

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**Phone (Specify Day or Night)**

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**E-mail Address**

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**Reasons for Request  
for Extended Grace  
Period for Filing  
Waiver Materials\***

\*Attach additional sheets as necessary.

**Done by my hand, this**

**Day of**

**In the Year**

**Legal Signature, Seneschal of Hosting Group**

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