Kingdom of Atlantia

Re-Warrant Request for Branch Seneschal

I, _____ (print name) assert that the _____ (branch designation) of _____ (branch name) would like to retain me as Branch Seneschal as of _____ (date). In signing below, I certify that I understand and accept the responsibilities of Branch Seneschal and that I will maintain membership, phone and e-mail access for the duration of any warrant granted.

Signed: _____ (modern signature)
Date: _____

We, officers of the above named branch, certify that the above is acceptable to remain the Seneschal of the branch. (modern signatures)

_____ (_____ office)

_____ (_____ office)

_____ Baronage (if Barony)

Candidate Contact Information

Modern Name: _____

SCA Name & Title: _____

Address: _____

Phone Number: _____

Email Address: _____

Member # _____ Exp date: _____

Permission to publish Acorn:
☐ Modern name ☐ SCA Name ☐ Address ☐ Phone Number ☐ Email Address

Permission to publish Kingdom website:
☐ Modern name ☐ SCA Name ☐ Address ☐ Phone Number ☐ Email Address

Retain copy for Branch Records. E-mail scanned copy to Regional and Kingdom Seneschal.

This warrant was accepted on _____ and is valid until _____