DATE: _____ ☐ **EVENT** ☐ **PRACTICE**

ACTIVITY: ☐ **Armoured** ☐ **Rapier** ☐ **Archery** ☐ **Y. Combat** ☐ **Waterbearing**
☐ **Marshalling** ☐ **Heralding** ☐ **Other (specify)** _____

Person in charge of Activity: _____

#	NAME	NSCA MEMBERSHIP STATUS
		☐ NSCA MEMBER (CARD HAS WAIVER STAMP) ☐ NOT NSCA MEMBER (NSCA WAIVER SIGNED)
		☐ NSCA MEMBER (CARD HAS WAIVER STAMP) ☐ NOT NSCA MEMBER (NSCA WAIVER SIGNED)
		☐ NSCA MEMBER (CARD HAS WAIVER STAMP) ☐ NOT NSCA MEMBER (NSCA WAIVER SIGNED)
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