## Application for Branch Advancement to Full Status Society for Creative Anachronism, Inc. – Kingdom of Northshield

Branch Name:	Branch Type:
Main City/State:	Region:
Dates:	
• Date established as a new group:	
• Date name passed SCA College of Heralds	
• Date device passed Northshield College of Hera or Date device passed external commentary	alds
• Date this application sent to Regional Senescha	1
Members: Paid members living in your proposed boun Other (non-members)	idaries
<u>Seneschal</u>	
Society Name:	
Legal Name:	
Address:	
Phone Number: Email:	
SCA Membership # Expiration	n Date:

## **Enclosures**

- □ Map of area, showing proposed group boundaries and boundaries of adjacent groups
- $\square$  A complete listing of zip codes claimed
- □ Group Members roster, including proof of membership for at least five members (this can be of any membership types, not just sustaining) living within your geographic claimed area. Please include membership number and expiration date of membership.
- □ Complete roster of branch officers, with names, addresses and membership information. Include copies of latest reports.
- □ Summary of activity, showing the diversity and quality of activities (events, meetings, demos, etc.) that your branch has had as a new group.
- □ Letters or recommendation from your sponsor and some of the adjacent groups (for cantons, a letter of recommendation from your Baron/Baroness)
- □ Letter of Petition to the Crown and Seneschal of Northshield, asking for elevation to full status. This should be signed by at least two-thirds of your populace indicating support that your group wants to go to full status.

## As acting seneschal for this branch, I certify this form is accurate and complete to the best of my knowledge.

\_\_\_\_(modern signature) Date:\_\_\_\_\_