



Proposal for a new SCA Group within Australia/New Zealand. Application Form

Proposed Group type (please tick)	Shire <input type="checkbox"/>	Canton <input type="checkbox"/>	College <input type="checkbox"/>
Approx. date of first Group meeting:			
Geographical area claimed (description or attach map):			
Postcode list (Aust) or telephone area codes (NZ):			
Membership interest	Members		Non-members
Proposed Seneschal. . . .Contact person for the Group			
Mundane Name:			
SCA Name (optional):			
Postal Address:			
			Postcode:
Phone number:			
Email address:			
SCA Membership Number:			

Please submit this form along with both Proposal Petitions, (member and non-member) and the Supporting Group acknowledgement form , with the required signatures