AnsteorraCollege of Heralds

Name Submission Form for S.C.A. Branches

=			
Branch Name			
+ Name being submitted (if different from above)			
Legal Name of Contact		Name Type (pick one) Primary	Action Type
		Order/Award +	Resubmission ++ Kingdom
Phone Number	Date Submitted	Household + Other (specify) +	Laurel Change+ (if registered, old name
	Herald's E-mail / Phone		will be released) Appeal (attach
++ Name(s) previously submitted but not registered (if any)			justification)
++ Kingdom submitted from:	++Date returne	ed:	·
and/or device being submitted. It is	must be accompanied by a petition showing the supp must be signed by the Seneschal and either three-fo pal Herald if you have questions about the procedur	ourths of the officers or a	
Name processing criteria. Read th	ese carefully. Laurel may need to make changes in	order to register the nar	ne.
	ng/dropping a name element, changing an element's nts, punctuation, hyphenation, addition or deletion of		
	changes to our name, even if the name cannot be r	registered without such	changes.
■ We will NOT accept MAJOR of	or MINOR changes to our name, even if the name	cannot be registered wi	thout such changes.
Note: Leaving these checkboxes b	olank indicates that you will accept both major and m	inor changes in order to	register your name.
If our name must be changed, we (Please specify "meaning", "sound	care most about:	— · · —	nguage and/or culture
[OPTIONAL] Please CHANGE ou	r name to be authentic for:		
	century' or 'Irish' or 'Welsh', rather than saying 'early ect this option if you do not wish changes to your nar		nguage and/or culture ne period
Name Documentation and Con	sultation Notes (attach additional sheets and d	locumentation as nee	eded.)

Instructions: send 1 copy of this form and any documentation to Asterisk (name and address in the Black Star). It is recommended that the local/consulting herald keep a copy.

	Amount Received	Date Received	Action Taken	Amount Forwarded	Date Forwarded
Local					
Kingdom					
Laurel					