

# Chirurgon-In-Charge Event Report

**Event Name:** \_\_\_\_\_ **Event Date(s)** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Host Branch :** \_\_\_\_\_

**Autocrat:** \_\_\_\_\_ **Chirurgon in Charge:** \_\_\_\_\_ **Ph #** \_\_\_\_\_

**Marshal(s)-In-Charge:** \_\_\_\_\_

**Total Attendance\*:** \_\_\_\_\_ **Total Fighters\*\*:** Armored: \_\_\_\_\_ Rapier: \_\_\_\_\_ Non-Contact / Equestrian: \_\_\_\_\_

**Weather And Conditions:** \_\_\_\_\_

\*From Autocrat or Gate

\*\*From Marshal(s) in Charge

<b>Warranted Chirurgons Attending</b>		
SCA Name	Rank	Branch

<b>Apprentice Chirurgons Observed*</b>	
SCA Name	Branch

\*Attach Apprentice Evaluations

**TOTAL SEVERE INJURIES\*:** \_\_\_\_\_ - Notify Kingdom Chirurgon within 24 hours of end of event.

**None**    *Separate incident forms attached*    **Really, Nothing Happened ☺!**

**People Deserving Commendation and Why:)** Use back or attach a separate sheet if necessary

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**Issues:** Use back or attach a separate sheet if necessary – Send details of major issues to Kingdom Chirurgon within 24 hours of event

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**Other Comments or Observations:**

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**Chirurgon-In-Charge:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

**Legal Name:** \_\_\_\_\_ **Legal Signature:** \_\_\_\_\_

**Note to the signing Chirurgon:**

Mail this completed form and any attachments to your Geographic / Principality Deputy within **one week** of the event.

