

# Midrealm Resignation and Change of Office Form

Please print legibly to avoid typographical errors.

## Outgoing Officer

SCA Name & Title: \_\_\_\_\_

Modern Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

I intend to resign as \_\_\_\_\_

(office) of the SCA branch called \_\_\_\_\_

\_\_\_\_\_ located in \_\_\_\_\_

I understand that it is my duty to transfer all of the files and property of the office to my successor promptly.

My resignation will take effect \_\_\_\_\_ (date).

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

We, the undersigned, officers of \_\_\_\_\_ have been informed of this proposed officer change in our branch.

## Other Branch Officers

Name: \_\_\_\_\_

Office: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Office: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Office: \_\_\_\_\_

Date: \_\_\_\_\_

Baron/ess, if applicable

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## Acting Officer

SCA Name & Title: \_\_\_\_\_

Modern Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number (if available): \_\_\_\_\_

Email Address: \_\_\_\_\_

Membership Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I agree to serve as \_\_\_\_\_ (office)

of the SCA branch called \_\_\_\_\_

located in \_\_\_\_\_.

I understand that it is my first duty to notify my Regional and Kingdom Officers. I understand that I will function as an acting officer until the appropriate Kingdom Officer and the Crown of the Middle Kingdom warrant me. I am a sustaining member in good standing of the Society for Creative Anachronism, Inc., or I am an associate or family member and live at the same address as a subscribing member. I understand that I must regularly report on the state of my office to the branch members and to the appropriate Regional and Kingdom Officers. To the best of my knowledge I am able to fulfill all requirements and to perform all duties of the office. I also consent to have my contact information on the Kingdom newsletter and on the Kingdom web-site.

## Consent to Publish

I do hereby grant permission to publish my contact information on any page hosted by the domain midrealm.org and in The Pale, the Midrealm Newsletter for the purposes of the SCA.

\_\_\_\_\_  
PRINT MODERN NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

## FOR ADMINISTRATION USE ONLY:

Copies To:  
Regional Officer  
Kingdom Officer  
Branch Files

Entry Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Database Object ID: \_\_\_\_\_

Received/Entered by: \_\_\_\_\_