



The Society for Creative Anachronism Ltd
 ABN: 13 117 403 648

Activity: _____ Date: ___|___|20___

Activity Attendance & Transaction Record

Location: _____ Page: ___ of ___

Non Member payment record- Indemnity sign in still required

	Legal Name	Indemnity Signed	Amount Paid	Notes (ie Minor Member – free entrant)	Signature (or guardian's)	
1						
2						
3						
4						
5	NON MEMBER ONLY					
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Gatekeeper Certification: I certify that the record shown here is an accurate representation of the attendance and transactions at this activity. If I am a Reeve / Responsible Financial Officer for the Society for Creative Anachronism Ltd, a witness has cross-checked this form for accuracy

Name: _____ Signature: _____ Witness: _____ Signature: _____