Drachenwald

College of Heralds

Name Submission Form

for S.C.A. Branches

Branch Name	
+ Name being submitted (if different from above)	
Modern Name of Contact	Name Type (pick one) Action Type
Address	Order/Award + Resubmission ++ Guild / Kingdom
Phone Number Date Submitted	
E-mail Address	(if registered, old name will be released)
Consulting HeraldHerald's E-mail / Phone	Appeal (attach
++ Name(s) previously submitted but not registered (if any)	justification) ∭Other (specify)
++ Kingdom submitted from:++Dat	e returned:
Note: Group Names and Devices must be accompanied by a petition showing and/or device being submitted. It must be signed by the Seneschal and either populace. Consult with Edelweiss Herald if you have questions about the proceeding submitted.	three-fourths of the officers or a majority of the
Name Processing Preferences. Read these carefully. Laurel may need to make	e changes in order to register the name.
You have the right to a Request for Reconsideration if you do not like a cha See the Herald's Administrative Handbook IV.F for details.	ange made to your name.
We will NOT accept any changes to our name, even if the name cannot be	registered without such changes.
We will accept the following changes to our name	
Note: Leaving these checkboxes blank indicates that you will accept all chang	es necessary in order to register your name.
If our name must be changed, we care most about:	ound 🗌 spelling 🗌 language and/or culture
(Please specify "meaning", "sound", or "language and/or culture" desired)	
[OPTIONAL] Please CHANGE our name to be authentic for:	
Please be specific, e.g. '12th-14th century' or 'Irish' or 'Welsh', rather than say 'late' or 'Celtic'. Please do not select this option if you do not wish changes to	
Name Documentation and Consultation Notes (attach additional sheet	s and documentation as needed.)

Instructions: Send the form and any documentation to Edelweiss Herald (edelweiss@drachenwald.sca.org). For payment information see "Submitting names and heraldry in Drachenwald" at drachenwald.sca.org/offices/herald/. I understand and agree that all information submitted on this form will be processed and permanently maintained by the SCA College of Arms, based in the USA. Please see https://heraldry.sca.org/privacy/ for privacy statement.

	Amount Received	Date Received	Action Taken	Amount Forwarded	Date Forwarded
Kingdom					