

Trimaris
 College of Heralds
Society Name

Device Submission Form

Modern Name

Address

.....

Phone Number

E-mail Address

Branch NameDate Submitted.....

Consulting HeraldHerald's E-mail/Phone

This name is (pick one):

already registered

submitted with this device

previously submitted from the Kingdom of

Action Type

New

Resubmission

Kingdom

Laurel

Change, if registered:

release old device

retain as badge

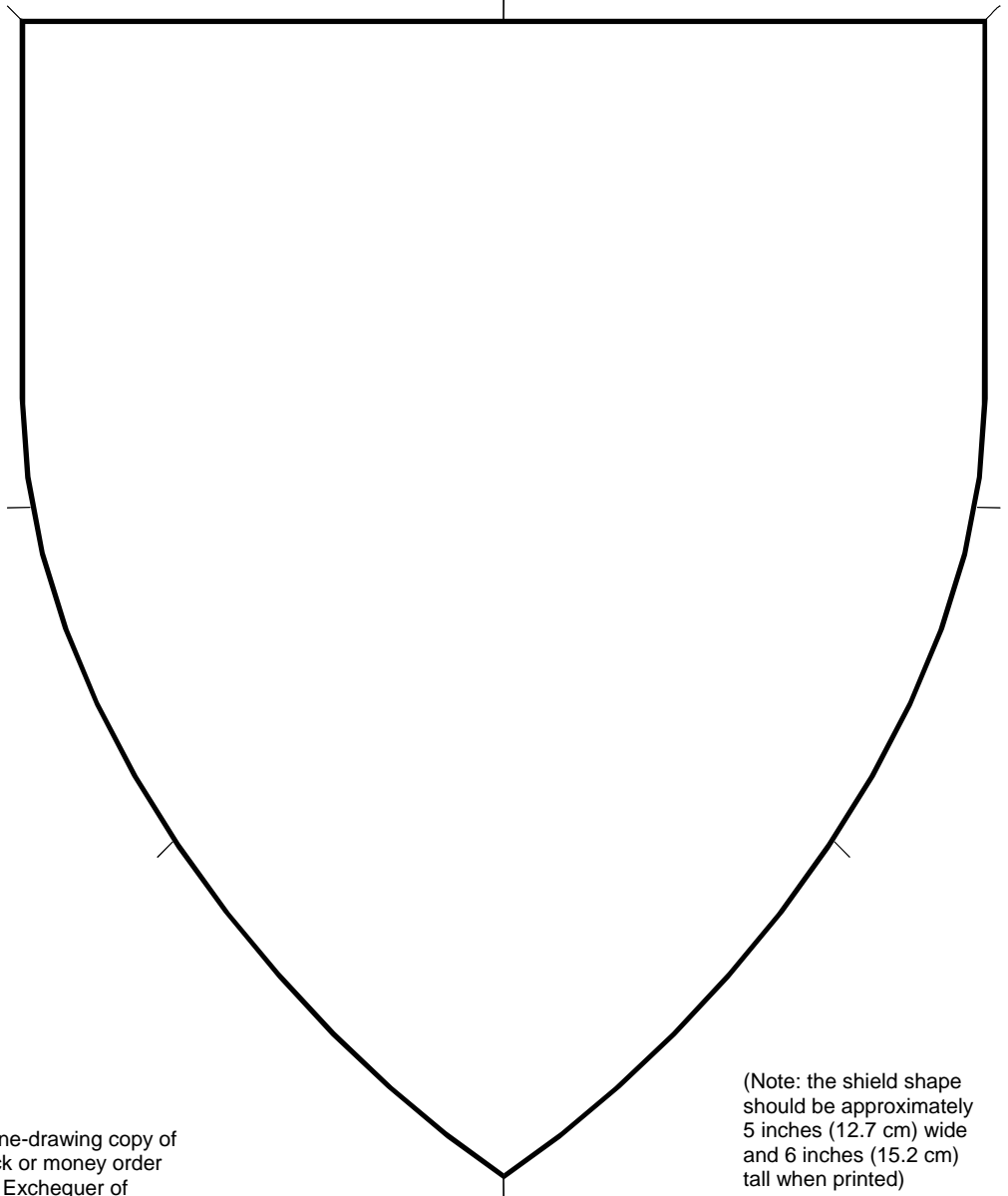
Appeal (attach justification)

Other (specify) _____

If using any restricted charges, please give Kingdom and date of eligibility for that charge.

.....

Proposed Blazon (Consult a herald if possible. Use plain English if you don't know how to blazon.)



Additional Documentation (as needed)

(Note: the shield shape should be approximately 5 inches (12.7 cm) wide and 6 inches (15.2 cm) tall when printed)

Instructions: Please send one color copy and one line-drawing copy of this completed form to hulk@trimaris.org. Mail check or money order payments to the Lymphad Herald of Trimaris or the Exchequer of Trimaris using the addresses listed on the Kingdom of Trimaris website. Make these payable to "SCA Kingdom of Trimaris". Please see <https://heraldry.sca.org/privacy/> for privacy statement.

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