

Name:
 Player:
 Chronicle:

Court:
 Legacies:
 House:

Seeming:
 Rich:
 Motley:

attributes

Physical		Social		Mental	
Strength	00000	Charisma	00000	Perception	00000
Dexterity	00000	Manipulation	00000	Intelligence	00000
Stamina	00000	Appearance	00000	Wits	00000

abilities

Talents		Skills		Knowledges	
Alertness	00000	Animal Ken	00000	Academics	00000
Athletics	00000	Crafts	00000	Computer	00000
Brawl	00000	Drive	00000	Enigmas	00000
Empathy	00000	Etiquette	00000	Gremayre	00000
Expression	00000	Firearms	00000	Investigation	00000
Intimidation	00000	Larceny	00000	Law	00000
Kenning	00000	Melee	00000	Medicine	00000
Leadership	00000	Performance	00000	Politics	00000
Streetwise	00000	Stealth	00000	Science	00000
Subterfuge	00000	Survival	00000	Technology	00000
	00000		00000		00000

advantages

Backgrounds		Arts		Realms	
_____	00000	_____	00000	Actor	00000
_____	00000	_____	00000	Fae	00000
_____	00000	_____	00000	Nature	00000
_____	00000	_____	00000	Prop	00000
_____	00000	_____	00000	Scene	00000
_____	00000	_____	00000	Time	00000

_____	Glamour
_____	0 0 0 0 0 0 0 0 0 0 0
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Willpower
_____	0 0 0 0 0 0 0 0 0 0 0
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Imbalance
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Antichesis
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Nightmare
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	Banality
_____	0 0 0 0 0 0 0 0 0 0 0
_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Experience	
<input type="text"/>	

	Health	Real	Chimerical
Bruised		<input type="checkbox"/>	<input type="checkbox"/>
Hurt	-1	<input type="checkbox"/>	<input type="checkbox"/>
Injured	-1	<input type="checkbox"/>	<input type="checkbox"/>
Wounded	-2	<input type="checkbox"/>	<input type="checkbox"/>
Mauled	-2	<input type="checkbox"/>	<input type="checkbox"/>
Crippled	-5	<input type="checkbox"/>	<input type="checkbox"/>
Incapacitated		<input type="checkbox"/>	<input type="checkbox"/>
Birthrights/Frailties			
Ravaging/Using Threshold			

character history sheet

Mortal Name: _____
Faerie Name: _____
Mortal Age: _____
Mortal Profession (if any): _____

Chimera/Companions/Treasures:

description

Mortal: _____

Changeling: _____

personality

Quirks: _____

Motivations & Goals: _____

identity

Mortal: _____

Changeling: _____

equipment

oathcircle

other notes

