

### Event Details

PERMIT NO.

EVENT

DATE — —

ORGANISING CLUB/BODY

VENUE/LOCATION

TYPE OF EVENT (DISCIPLINE)

CLERK OF COURSE

CHIEF SCRUTINEER

STEWARDS

MEDICAL FACILITIES  
PRESENT

CIVIL AMBULANCE

OTHER AMBULANCE

PRIVATE OPERATOR

FIRST AID

### Event Report

NO. OF ENTRIES

NO. OF STARTERS

NO. OF FINISHERS

Note: If applicable, please distinguish above questions by level of competitor (i.e. 30 National, 25 State, 20 Club)

|  |     |    |     |
|--|-----|----|-----|
| <b>A. Were there any charges laid or protests lodged?</b>  | YES | NO |     |
| <b>B. Were any penalties imposed?</b>  | YES | NO |     |
| <b>C. Was scrutiny satisfactory?</b>   | YES | NO |     |
| <b>D. Was document check satisfactory?</b>   | YES | NO |     |
| <b>E. Did the event start on time?</b>   | YES | NO |     |
| <b>F. Were there any issues with the track/venue?</b>  | YES | NO |     |
| <b>G. Were there any issues with officials?</b>  | YES | NO |     |
| <b>H. Was the event run in accordance with the NCR and Supplementary Regulations?</b>                | YES | NO |     |
| <b>I. Was it necessary to make any demands of the Clerk of the Course?</b>                           | YES | NO |     |
| <b>J. Was any competitive stage or session of the event stopped or deleted?</b>                      | YES | NO |     |
| <b>K. Were all the relevant permits/letters of permission from the relevant authorities sighted?</b> | YES | NO |     |
| <b>L. Was the operation of spectator controls satisfactory?</b>                                      | YES | NO |     |
| <b>M. Was the operation of controls satisfactory?</b>  | YES | NO | N/A |
| <b>N. Was the operation of road closures satisfactory?</b>   | YES | NO | N/A |
| <b>O. Were all roads used for competitive stages closed?</b>   | YES | NO | N/A |
| <b>P. Was the pit area satisfactory?</b>   | YES | NO | N/A |

## General Comments

Please provide comments/recommendations/observations about the preparation/running of the listed event.  
Also provide any comments relating to the questions in the *Event Report* section. Attach any applicable paperwork.

## Declaration

NAME OF STEWARD(S)  
COMPLETING FORM

STEWARDS SIGNATURE

SIGN HERE

DATE

— —

MOBILE

EMAIL