CLERK OF THE COURSE EVENT REPORT FORM 02.12

Club Name		Event Name	
Event Venue		Event Date	
Permit Number		Course Certificate No	
Clerk of the Course		Licence Number	

Officials	Name	Address	Licence (Where Applicable)
Event Secretary			
Assistant Clerk			
Chief Technical (If Applicable)			
Timekeeper			
Starter			
Child Protection Officer			
Incident Officer (If Applicable)			

Medical	Name	Address	
Chief Medical Officer			
No. of Personnel		No. of Ambulance	

General			
Weather Conditions			
No. of Competitors		No. of Officials	

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Report	PLEASE TICK	
	YES	NO
Was the circuit laid out as per the Course Certificate *		
* If not have the alterations to the Certificate been made and signed off		
Was the paddock large enough for the size of the entry		
Was the paddock laid out to allow for emergency egress of all vehicles		
Was the paddock laid out to allow for emergency vehicle access		
Was the Event Risk Check List carried out prior to the start of the event		
Were the disclaimer signs visible at all entrance gates		
Were all areas prohibited to the public signed as such.		
Was Technical Control managed and carried out correctly (If applicable)		
Was signing on carried out satisfactorily		
Were fire extinguishers in place and signed		
Were the sanitary provisions suitable for the attendance		
Was a no riding in the paddock rule enforced		

If the answer to any of the above was no, please comment below

Were there any Protests to the Clerk of the Course	YES	NO
Were there any Appeals to NORA 92 Ltd	YES	NO
If there was a serious incident was the checklist and report form completed	YES	NO

Please enclose copies of all protest, appeal and serious incident checklist and report paperwork

Signature

Date

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