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| **CLERK OF THE COURSE CLOSING REPORT FOR RACES** |
| **ORGANISING CLUB**: |
| **DATE OF EVENT:**  | **PERMIT NO:** | **STATUS:** |
| Track/Weather Conditions:  |
| Documentation Problems: |
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| Scrutineering Problems:  |
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| Official Practice Started at: am/ pm | Racing Started at: am / pm |
| Incidents/Accidents: |
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| Were there any Health and Safety issues or any issues that could have become a Health and Safety issue that you were aware of? YES NO If Yes please provide a separate report. |
| Number of Penalties issued | Decision Forms attached:*If No is ticked provide details of penalties imposed below.* | YES | NO |
| Details of Penalties imposed: *Only applicable where the decision forms are not attached*. |
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| Protests Received: |
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| General Comments: |
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| Signed: Clerk of the Course | Print Name: | Time: | Date:  |