



## CLERK OF THE COURSE REPORT

<b>ORGANISING CLUB:</b>			
<b>DATE OF EVENT:</b>		<b>PERMIT NO:</b>	<b>STATUS:</b>
Track/Weather Conditions:			
Documentation Problems:			
Scrutineering Problems:			
Official Practice Started at:		am/ pm	Racing Started at:
			am / pm
Incidents/Accidents:			
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:	YES	NO
	<i>If Yes is ticked provide details of penalties imposed below.</i>		
Details of Penalties imposed: <i>Only applicable where the decision forms are not attached.</i>			
Protests Received:			
General Comments:			
Signed:	Print Name:	Time:	Date:
Clerk of the Course	Licence No:		