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| **CLERK OF THE COURSE REPORT - RACE** |
| **ORGANISING CLUB**: |
| **DATE OF EVENT:**  | **PERMIT NO:** | **STATUS:** |
| Track/Weather Conditions:  |
| Documentation Report: |
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| Scrutineering Report:  |
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|  |
| Official Practice / Qualifying Started at: am/ pm | Racing Started at: am / pm |
| Incidents/Accidents: *[Additional Information to be Attached]* |
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| Were there any event safety issues or any issues that could have become an event safety issue that you were aware of? YES NO If Yes please provide a separate report. |
| Number of Decisions issued | Decisions Attached*(if No is ticked please provide details)* | YES | NO | Payment Method of Fines Received: |
| Protests Received: |
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| General Comments: |
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| Signed: Clerk of the Course | Print Name:Licence No: | Time: | Date:  |