

CLERK OF THE COURSE REPORT - RACE

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|--|---|-------------------|----------------------------|-----------------------------------|
| 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: <i>[Additional Information to be Attached]</i> | | | | |
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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 <i>(if No is ticked please provide details)</i> | YES | NO | Payment Method of Fines Received: |
| Protests Received: | | | | |
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| General Comments: | | | | |
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| Signed: | | Print Name: | Time: | Date: |
| Clerk of the Course | | Licence No: | | |