



# CLERK OF COURSE REPORT

|               |  |             |  |
|---------------|--|-------------|--|
| Promoter:     |  |             |  |
| Meeting Name: |  |             |  |
| Venue:        |  |             |  |
| Date:         |  | Permit No.: |  |

Club

Interclub

National

|                       |  |                        |  |
|-----------------------|--|------------------------|--|
| Clerk of Course:      |  | Chief Scrutineer:      |  |
| Secretary of Meeting: |  | Chief Medical Officer: |  |

|   | <u>PRACTICE</u> | <u>COMPETITION</u> |
|---|-----------------|--------------------|
| <b>1. Track conditions at commencement of</b> |                 |                    |
| <b>2. Weather conditions during</b>           |                 |                    |
| <b>3. Officials present - Stewards</b>        |                 |                    |
| a) All Nominated Senior Officials             |                 |                    |
| b) Sufficient Other Officials                 |                 |                    |
| c) Doctor (if applicable)                     |                 |                    |
| <b>4. Other Services Present</b>              |                 |                    |
| a) Ambulance / FIV (state number of)          |                 |                    |
| b) Operational Medical Centre                 |                 |                    |
| c) Operational Timing                         |                 |                    |
| d) Operational Communications                 |                 |                    |
| e) Fire extinguisher as per By Laws Fire      |                 |                    |
| f) Travelling Marshals                        |                 |                    |
| g) Mobile Rescue Units                        |                 |                    |
| h) Recovery Vehicles                          |                 |                    |
| <b>5. Start</b>                               |                 |                    |
| a) Permission to start given by the Steward   |                 |                    |
| b) Scheduled Start Time                       |                 |                    |
| c) Actual Start Time                          |                 |                    |

IF START WAS DELAYED, PLEASE GIVE REASONS:

|   | <u>PRACTICE</u> | <u>COMPETITION</u> |
|---|-----------------|--------------------|
| 6. Did the programme run to schedule?   |                 |                    |
| 7. Was it necessary to seek Stewards permission to vary the Supplementary Regulations or the Programme? |                 |                    |
| 8. Were any charges laid?   |                 |                    |
| 9. Were any protests received?  |                 |                    |
| 10. Were there any Injury / Accident Reports?   |                 |                    |

If so give brief details and attach relevant reports for each occasion:

11. Brief statement summarising the meeting, including any matters brought to the Stewards attention:

**THIS REPORT IS CONFIRMED BY THE SIGNATURE OF THE CLERK OF COURSE:**

|           |  |                 |  |
|-----------|--|-----------------|--|
| Name:     |  | MA Licence No.: |  |
| Date:     |  | Time:           |  |
| Signature |  |                 |  |

A protest against this determination may be made to the Steward by stating that grounds of the protest within 30 minutes from the time of receipt of this letter, paying a fee of \$70.00.