



CLERK OF THE COURSE REPORT



CROSS COUNTRY & ENDURO MOTOR CYCLE EVENTS

CLUB :												
NAME OF EVENT :								VENUE				
DATE :				PERMIT :				STATUS : Cup / Challenge / Championship (Tick one)				
JURY PRESIDENT						1 ST JURY MEMBER :						
CLERK OF THE COURSE :						2nd JURY MEMBER :						
CHIEF SCRUTINEER :						CHIEF SCORER :						
CHIEF MARSHAL						CHIEF MEDICAL OFFICER :						
NO. OF ROUTE MARSHALS						NO. OF ROAD CROSSING MARSHALS						
NO. OF PIT MARSHALS						NO. OF PIT SAFETY OFFICERS						
NO. OF ENTRIES :	SORC BIKES			SORC QUADS			SUPPORT BIKES			SUPPORT QUADS		
PLEASE SPECIFY	<u>B1</u>	<u>B2.</u>	<u>B8</u> WIM	<u>B3.</u>	<u>B9</u> WIM		<u>Nat.</u>	<u>Reg.</u>	<u>Club</u>	<u>Nat.</u>	<u>Reg.</u>	<u>Club</u>
NO. OF STARTERS												
NO. OF FINISHERS												
SCHEDULED RACING START TIME :						ACTUAL RACING START TIME :						
WAS ANY PART OF THE EVENT CHANGED / CANCELLED?												
FINISHING VENUE						FINISH TIME OF 1st COMPETITOR :						
						FINISH TIME OF LAST COMPETITOR :						
NO. OF DOCTORS PRESENT						NO. OF PARAMEDICS PRESENT :						
HELICOPTER						AMBULANCE – TRAUMA						
NO. OF AMBULANCES												
WERE ANY DRUG / ALCOHOL TESTS CARRIED OUT? (attach details where applicable)												
WERE PRE-RACE SCRUTINY CHECKS CARRIED OUT? (attach details where applicable)												
WERE ANY ENTRIES REJECTED AS UNFIT TO COMPETE? (attach details where applicable)												

WERE POST-RACE SCRUTINY CHECKS CALLED FOR? (attach details where applicable)			
WERE THE JURY PRESENT AT :		a) the Start :	
b) during the event :	c) at the end of the event :	d) at prize giving	
IF THE JURY WERE NOT PRESENT AT TIMES STATED IN (A) TO (D) ABOVE, give reasons for their absence and advise whether prior arrangements were made with the organisers :			
WERE ALL STARTS COMPLETED CORRECTLY? (attach details of irregularities)			
WERE ANY INCIDENTS/ACCIDENTS REPORTED? (attach details where applicable)			
GIVE DETAILS OF ANY COMPETITORS WHO WERE BLACK FLAGGED, REPRIMANDED, EXCLUDED, FINED, ETC.			
No :	Name :	Penalty imposed :	
Details			
No. :	Name :	Penalty imposed:	
Details :			
No.	Name :	Penalty imposed :	
Details :			
No.	Name :	Penalty imposed:	
Details :			
GENERAL REMARKS : (Clerk of the Course)			
Signature :		Date :	
PLEASE ATTACH THE FOLLOWING DOCUMENTS TO THIS REPORT :			
1) Entry List	2) Final Instructions and Amendments		
3) Race Programme	4) Reports from Scrutineers, Marshals etc. (where applicable)		
5) COMPLETE AND LEGIBLE Results	6) FULLY COMPLETED Accident Report Form		
NOTE :	OFFICIAL USE ONLY FIM AFRICA THANKS YOU FOR DEVOTING YOUR TIME AND EFFORT TO OFFICIATE AT THIS EVENT.		

TOTAL DISTANCE COVERED BY ALL COMPETITORS

No. of Competitors : @kms
Total No.of kms laps of km