



ACU Road Race Department,
ACU House,
Wood Street, Rugby, CV21 2YX
Tel: 01788 566406
Fax: 01788 573585

Stewards Report Form

RR06/2019

Type of event – Road Race / Sprint / Drag / Hillclimb / Supermoto / Scooter / Pocket Bike
(Please delete as applicable)

Permit No _____ Organising Club _____

Date _____ Venue _____

Course Licence No _____ Status _____

Please print replies when applicable

1 Organisation

- a) Was adequate information received prior to the meeting? Yes / No
Passes/Supplementary Regulations/Final Instructions etc
- b) Were instructions to Competitors adequate? Yes / No
- c) Were the Senior Officials of the correct grade and competent? Yes / No
- d) Was the permit available for inspection? Yes / No
- e) Did the Clerk of the Course keep the Stewards properly informed? Yes / No

2 Course

- a) Was the Course Licence available for Inspection Yes / No
- b) Were the number of marshals adequate for the status of the event Yes / No
- c) Were the marshals competent? Yes / No
- d) Were the fire precautions satisfactory? Yes / No
- e) Weather and Track Conditions Practice _____
Race _____
- f) Were the Communication Systems satisfactory Yes / No
- g) Are there any conditions relating to the course that should be brought to the attention of the Road Race Committee. Yes / No
If Yes please give more details in Section 6

3 Technical Control

- a) Were Technical Control facilities satisfactory Yes / No
- b) Were Noise Tests conducted Yes / No

4 Judicial

Please submit full details of all judicial decisions taken by the Clerk of the Course and the Stewards. Give names and licence numbers of anyone involved in judicial or disciplinary action whether as a result of a protest/ appeal or action initiated by the Organisers.

Please attach all documents with regard to any Disciplinary decisions.

5 Details of Senior Officials – required for all the following officials, please do not leave blank.

	Name	Licence No
Chief Steward	_____	_____
Clerk of the Course	_____	_____
Deputy Clerk of the Course	_____	_____
Chief Technical Officer	_____	_____
Chief Medical Officer	_____	_____
Incident Officer	_____	_____
Secretary of the Meeting	_____	_____

6 Comments

This Stewards Report Form must be returned to ACU Head Office within 7 days of the event

Together with the following:-

- Programme
- List of Starters (Practice and Races)
- List of Official results
- Complete set of minutes of Steward(s) Meeting
- Incident Officers Report Form
- Technical Control Report Form
- Non Production of Competition Licence Form & Fees (cheques made payable to ACU Benevolent Fund)
- Judicial paperwork

Chief Stewards Signature _____

Chief Stewards Address _____

Daytime Tel No. _____