

MOTORCYCLING QUEENSLAND NON-COMPETITION REPORT

IMPORTANT: This report must be received by Motorcycling Queensland within **5 days** of the meeting

NAME OF CLUB/PROMOTER			
NAME OF EVENT			
TYPE OF EVENT <small>(Recreational, Static display, Demonstration etc)</small>			
DATE OF EVENT			
Actual Start Time		Actual Finish Time	
PERMIT NUMBER			
LOCATION OF EVENT			
NAME OF CHIEF OFFICIAL			
TOTAL NUMBER OF PARTICIPANTS			
PARTICIPANTS NUMBERS	JUNIOR MALE		JUNIOR FEMALE
	SENIOR MALE		SENIOR FEMALE
No. One Event Recreation Licenses Sold via triplicate books			

<i>PLEASE TYPE YES OR NO</i>	YES	NO
DID THE EVENT GO TO PLAN?		
DID ALL RIDERS AND OFFICIALS SIGN THE INDEMNITY		

<i>PLEASE TYPE YES OR NO</i>	YES	NO
WERE THERE ANY INJURIES		
<i>PLEASE TYPE THE NUMBER OF INJURIES</i>	NUMBER OF INJURIES	
HOW MANY MAJOR INJURIES WERE THERE?		
HOW MANY MINOR INJURIES WERE THERE?		

ADDITIONAL COMMENTS
<p>PLEASE SAVE AND EMAIL THIS REPORT TO eventsassistant@mql.org.au WITH ALL OTHER PAPERWORK. INCLUDING</p> <ul style="list-style-type: none"> INJURY REPORTS ONE EVENT LICENCES SOLD A3 INDEMNITY FORM. <p>OR ALTERNATIVELY YOU CAN POST IT TO PO BOX 2072, NORTH IPSWICH, QLD 4305. IF YOU EMAIL THE PAPERWORK WE DON'T REQUIRE IT TO BE POSTED AS WELL.</p>