**Event Adjudicator Report**

**Name of Race:**

**Date of Race:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Area** | **Yes** | **No** | **N/A** |
| **1** | **Race Information** |  |  |  |
|  | Were there marshals to assist runners in the following areas and did the level of cover provided match that detailed in the Event Plan and/or briefing documents? |  |  |  |
|  | Start Line |  |  |  |
|  | Pre-Finish |  |  |  |
|  | Finish |  |  |  |
|  | Post Finish |  |  |  |
|  | Were marshals briefed before the event? |  |  |  |
|  | Were marshals located in the correct positions as detailed in the Event Plan and/or briefing documents? |  |  |  |
|  | Were marshals wearing distinctive tabards/bibs/tops? |  |  |  |
| **2** | **Signage** |  |  |  |
|  | Was there signage in the following areas? |  |  |  |
|  | Start Line |  |  |  |
|  | Information  |  |  |  |
|  | Changing |  |  |  |
|  | Toilets |  |  |  |
|  | Baggage |  |  |  |
|  | Finish |  |  |  |
|  | Further Comments on this Section |  |  |  |
| **3** | **Course Review** | **Yes** | **No** |  |
|  | Was the course adequately signed or taped? |  |  |  |
|  | Did the course have any obvious obstructions? |  |  |  |
|  | Was the course map on display at Race HQ |  |  |  |
|  | Was there sufficient parking provision |  |  |  |
|  | Was there provision to erect tents |  |  |  |
|  | Further Comments on this Section |  |  |  |
| **4** | **Medical Provision** | **Yes** | **No** |  |
|  | Was there Medical Provision at the event? |  |  |  |
|  | Who provided this Service? Details:  |  |  |  |
|  | Was the Medical Risk Assessment available for inspection?  |  |  |  |
|  | Was the medical information template printed on the back of the race number? |  |  |  |
|  | Further Comments on this Section |  |  |  |
| **6** | **Risk Assessment** | **Yes** | **No** |  |
|  | Was the Risk Assessment available for inspection? |  |  |  |
|  | Further Comments on this Section |  |  |  |
| **7** | **Certification** | **Yes** | **No** |  |
|  | Was the licence displayed for public view |  |  |  |
|  | Further Comments on this Section |  |  |  |
| **8** | **Incidents** |  |  |  |
|  | Please describe any incidents not included in previous questions |  |  |  |
|  | Did you share any of your comments with the Race Promoter before submitting this report |  |  |  |
|  | Please explain why: |  |  |  |
|  | Further comments: |  |  |  |
|  |  |  |  |  |

If you identify any areas where Licence Standards have not been achieved, please note this in the comments section. If you did not witness any of the above please identify who your source of information came from e.g. athletes or additional helper.

This form is to be completed online within 7 days of the event and will be reviewed by the Regional Panel.