



ORIENTEERING QUEENSLAND INC.

PO Box 114 Spring Hill Qld 4004

ABN: 36 766 130 187

LOCAL CLUB EVENT REPORT

(Organiser to complete and forward to the Club Treasurer - with the event money)

DATE: ___ / ___ / ___ CLUB: _____ EVENT TYPE: _____
BBQ, BUQ, ENQ, MTQ, PLQ, RRQ, SOQ, TFQ, TTQ, UGQ, e.g. Bush, Park O, NightNav, MTBO, Sprint, Coaching

ORGANISER: _____ LOCATION: _____

CONTROLLER: _____ WEATHER: _____
(If Applicable)

EVENT ENTRIES

(Taken from registrations. Don't include 'DNS's')

No. Individual entries** _____

No. Family entries (Pay a family rate) _____

No. Group entries * _____

Total Participants** (for SRQ stats) _____ (total individuals in event)

* A group entry (usually Non-members) is charged a "group rate" and go around" together" as a group, usually on one SI stick. Include their details on page two of this report.

**If a person goes out on a second course, don't count as an additional entry for levy purposes

INJURY REPORT Did an injury or incident occur? (please ✓) YES NO

If YES, complete an [INCIDENT REPORT FORM](#) and send immediately to: - secretary@oq.asn.au

CLEANUP Was the event arena inspected and left as found? YES NO

If there were issues, complete and send in the incident report form as above

Monies Payable to OQ

Club Treasurer to complete

OQ Levy @ \$3.00 per individual entry (weekday or weekend event) \$ _____

OQ Levy @ \$10.00 per family entry (weekday or weekend event) \$ _____

OQ Levy @ \$6.00 per group entry (weekday or weekend event) \$ _____

OQ Levy :- NIL per entry for school, coaching, promo events \$ _____ NIL

TOTAL AMOUNT PAYABLE \$ _____

PAID BY

EFT or deposited at Bank of Qld, BSB 124-084, Acc. No: 22968522, Orienteering Queensland Inc. with club & event name in description.

OR to be paid quarterly at the end of March, June, September and December

Signature _____ Date: ___ / ___ / ___
Club Treasurer

Club Treasurer to email forms to:- treasurer@oq.asn.au within 1 week of event.

OQ Event Participation Record for NON Members and GROUPS

| Event: | | Organiser: | | Date: | Club: | |
|--------|------------|-------------------|--|-------|-------|-----|
| | FIRST NAME | SURNAME (Grp No.) | Phone AND email contact (for safety & re-contact) | | M/F | YOB |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| 11 | | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |
| 19 | | | | | | |
| 20 | | | | | | |

INSTRUCTIONS: The purpose of this form is to collect the age category, gender and contact details of **non-members**. If a group isn't split in the software program, also use this form to list them individually. If a non-mbr group **is** listed individually, use this form to collect their contact details.
If this form is used, please also email to: statistician@oq.asn.au and to admin@oq.asn.au as well as to the treasurer.