



# 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, MKQ, 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 card or phone. 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](mailto: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](mailto: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 [admin@oq.asn.au](mailto:admin@oq.asn.au) as well as to the treasurer.***