## Tasmanian Canine Association Inc Event Managers Report

AFFILIATE	EVENT MANAGER		
VENUE:	Signed:		
FIXTURE DATE:	Date:		
Please give a time for the following			
Time event commenced			
Time event commenced  Time event finished			
Was the Official Representative available during the event?		YES/NO/NA	
Matters reported on the day please list (use back of this form if necessary)		RESOLVED	
•	is form if necessary,	YES/NO	
•		YES/NO	
		YES/NO	
•		123/10	
•		YES/NO	
List Stewards Contracted		GROUP	
		GROUP	
•			
•			
•			
•			
Did all Chavarda fulfil thair varbal/urittan aantraat?		VEONO	
Did all Stewards fulfil their verbal/written contract?		YES/NO	
Name/s of Steward/s who did not attend (Please list below)			
•			
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Judges  Did all Judges as par the schodule mublished in the TCA Ir	an Comette officiate?	VEC/NO	
Did all Judges as per the schedule published in the TCA Inc Gazette officiate?  Name/s of Judge/s who did not attend (Please list below)		YES/NO	
Any other comments			
Any other comments			
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•			
•			
•			

Sheet 2 forming part of Event Manager's Report date ......(please ensure that this sheet is signed if completed)

EVENT MANAGER'S SIGNATURE	