OFFICIALS SIGN ON REGISTER

MSA PERMIT NO: _____

NAME OF EVENT: _____

CLUB / PROMOTER: _____

VENUE: _____

DATE OF EVENT:

Under Licence No: INDICATE Licence No or Insurance No or specify if Indemnity had been signed

DESIGNATION	NAME	LICENCE NO	SIGNATURE
Clerk of the Course			
Assistant Clerk of the Course			
MSA Steward			
Club Steward			
MSA Environmental Officer			
Chief Scrutineer			
Chief Time Keeper / Lap Scorer			
Secretary of the Meeting			
Chief Marshal			