

NZHRA Area Steward Report Form



Host Club		
Date		
Venue		
Area Steward Present		
Scrutineers		
Clerk of Course		
Medical Services		
Fire Services		
Crowd Control		
Type of Communications		
Day Affiliations	Number attended:	Money Received:
General Comments (use separate sheet if necessary)		
Incident Reports (use separate sheet if necessary)		
Accident Reports (use separate sheet if necessary)		

Signed _____

Date _____