

## The Association of Running Clubs

## **Post Event Information Sheet**

To be completed by the Promoting Body within one month of the ARC Permitted event and forwarded to the address below with a cheque for 25% of the total Unattached levies collected and a copy of the full list of entrants.

Event name:	Date of event:	
Name of Referee:		
Medical Cover Provider:		
Police authority and contact officer:		
Number of entrants: Affiliated Unaffiliated ** Total		
Number of finishers		
** Total unaffiliated entrants x £2 x 25	% = £ , cheque enclosed for thi	s amount.
Please give details in this box of any signifing in consultation with your lead medical personal perso	on).	
Where any incident has occurred that could lead to an Insurance Claim you must complete an ARC Incident Report form available on ARC website (www.runningclubs.org.uk) within 7 days of the event.		
Signature	Position	Date
Send to: Michael White, 19, Sheephouse Green, Wotton, Dorking, Surrey RH5 6QW		