**Event**

***Fill in the information in this column:***

|  |  |
| --- | --- |
| CTSASA Event : |  |
| Date of Event : |  |
| Name of Jury Convenor : |  |
| Name of Jury Member completing this report |  |
| Contact cell no. of Jury Member completing this report |  |
| Email of Jury Member completing this report |  |

**Report on Event**

|  |  |
| --- | --- |
| Were the jury members selected in accordance with the CTSASA Competition Regulations? | YES/NO |
| Were the jury members notified in advance that they were required for jury duty? | YES/NO |
| Were there any appeals to the jury? | YES/NO |
| If there were any appeals, were these handled fairly and efficiently? If no, please provide details of any problems. |  |
| Were there any safety problems? If yes, please provide details. |  |
| Were you satisfied that all ranges were set in accordance with the international specifications? If no, please provide details. |  |
| Were you satisfied that the ranges ran efficiently and smoothly? If no, please provide details. |  |
| Any other comments you feel are important |  |

**Signed:**

|  |
| --- |
|  |

**Dated:**

|  |
| --- |
|  |

**Please send this document to the CTSASA office at** **ctsasa@netactive.co.za****.**

*Thank you for your time!*