

AUSTRALIAN VETERAN CYCLING COUNCIL RACE DAY CHECKLIST

Australian Veteran Cycling Council Inc.



1. EVENT DETAILS

Date Host Club

Venue Name of Event

Type Of Event: Road Criterium Track Open Road/Track Closed Road/Track

Please place a tick (✓) in the appropriate box.

2. PERMITS – PRE PLANNING

Event Permits and other documentation required for this event	Required	Obtained	On hand
Police	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Road Traffic Authority	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Council	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Traffic Management Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other/provide detail?			

3. PRE RACE CHECK

Check List	Y or N or N/A	If 'N' what action taken to fix or if N/A why not?
First Aid: Names of 1st Aid personnel in attendance:		
First Aid Plan in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
First Aid personnel have communications?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Weather Conditions		
Have all guidelines been considered and is it safe to race. (extreme weather, bushfire, fog, lightning, rain)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Marshalls, support car and Traffic Controllers		
Have all had pre race briefing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Have all been issued with vests, flags?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are all linked up with communications to race referee?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Final check that all are in place and ready?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are lead and follow cars signed correctly?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Contact list available to all marshalls and traffic controllers and first aider personnel	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rider Briefing		
Briefing notes prepared	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Helmet and Bike check	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Who is giving the pre race rider briefing?		

Name of person giving briefing:

Signature of person giving briefing:

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4. HAZARD CHECK LIST

Check List	Y or N	If 'Y' what action taken to fix
Are there any obstructions on start/finish line? (cars, people, barriers)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Any cars parked on course or side of road	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Pre-race Course Check	Y or N	If 'Y' what action taken to fix
Minor hazards	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Major hazard – refer guidelines	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have all hazards been included in rider briefing?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

5. POST-EVENT INCIDENT REPORT

Post-race Incident Report	Y or N	Y or N
Any incident (accident, injury, disciplinary)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Separate Report Done? <input type="checkbox"/> Yes <input type="checkbox"/> No
Brief Detail of report submitted		

6. FORM COMPLETED BY REFEREE

Name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

By signing this form you are accepting responsibility for the answers provided. Insurance exists to protect the nominated referee who signs this form. Insurance cover may not exist for officials who show deliberate negligence or disregard for these responsibilities.

GUIDELINES

1. This form needs to be completed with exception of Section 5 before any event run or sanctioned by the AVCC and or its affiliates and member clubs.
2. It is the responsibility of the appointed Race Referee.
3. As this Checklist forms an integral part of the Risk Management process of the AVCC and its affiliated clubs, it is important that it is used for all races. The correct use will help your club identify any potential areas of risk and therefore provide opportunity to take steps to reduce that risk.
4. This form to be read in conjunction with the Safety Guidelines issued by AVCC.
5. Minor Hazards – intended to include dirt on course, pot holes, casual water, road works, verge damage, sharp corners, narrow bridges, sun glare, and parked cars.
6. Major Hazards – intended to include but not limited to cars parked on finishing straight, immovable objects or structures not normally on the road/track and pose threat of accident/collision. Can be roadworks, water over road, tree or some manmade object.
7. Major Hazard Action – must have one of following outcomes. A. Cancel race B. Reroute race C. Cone area and create 'neutral go slow zone' with a marshall in attendance. Note that if Major Hazard in finish straight then move finish line or cancel race.
8. What to do with completed form. Your club must keep a copy and the original form must be sent to the AVCC within 24 hours.

COMMENT OR SUGGESTIONS FOR USE OF THIS FORM

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