EVENT VERIFICATION FORM

Signed form and check sheet over the page to be completed by the National Judge, National Judge Candidate or Approved QRE Official & emailed to

[eventcheck@archery.org.au](mailto:eventcheck@archery.org.au) or posted to PO Box 54 Panania 2213 within 7 days of the Event. At tournaments with multiple events/venues (e.g. target/field/clout), a separate form is required for each event.

I, (insert official’s name) …………………………………………………………………………………………………………………. being the

\*National Judge \* National Judge Candidate \* Approved QRE Official

in attendance at the following Event: (event name) ......................................................................

Date: …………………………………………………… Host Organisation: ………….........................................................................

Venue: ………………………….…………………………………......................................……………………………………………………….…..

certify that the event was set up and conducted in accordance with Archery Australia and World Archery rules and AA QRE Guidelines (as applicable).

Event Information:

\*Outdoor Target \*Indoor Target \*Field \*Clout

Event type:

\*Tournament \*QRE

Number of QRE Participants: …………………………… (of Cadet age or older)

Number of Other Participants: ………………………….

Was it a World Archery Registered event? Yes No (please circle)

For Outdoor Target, Clout and Indoor

Round/s shot: ............................................................................................................................

Number of Targets:........................... Practice Starting Time: ................................................

First scoring end: ........................ First scoring arrow (for session 2 if applicable): ..................

For Field

Event starting time: ............................................

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**OUTDOOR CHECK SHEET**

(Please Circle one)

Safety arrangements checked including venue access YES NO

Shooting line marked YES NO

3-metre line marked and checked YES NO

Target face sizes checked for license & tolerances YES NO

Target distances checked and within tolerances YES NO

Target numbers used YES NO Wind flags used YES NO

Timing system used: **Auto** (Lights/Clocks) **Manual** (Stopwatch/Flags)

Current AA scorecard used YES NO

Equipment inspection completed (mandatory) YES NO

**FIELD / INDOOR CHECK SHEET**

Safety arrangements checked including venue access YES NO

Course check (distances and faces checked) YES NO

Correct sizes and number of faces used YES NO

Indoor faces correctly positioned YES NO

Current AA scorecard used YES NO

Equipment inspection completed (mandatory) YES NO

Additional information relevant to the event (attach extra pages if necessary)

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Official’s Signature: ............................................................. Date: .......................................