

Date Received \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Assoc. Sanction # \_\_\_\_\_

National Control # \_\_\_\_\_

N.O. Signature \_\_\_\_\_



Association Contact Information:

(This section must be completed by the Association before a refund is issued)

## USA TRACK & FIELD SANCTION POST-EVENT REPORT FORM

**All USATF Sanction Holders are required to submit this form to their local Association within fifteen (15) days after the event.** If the sanction is for a series of events, the form must be submitted within fifteen (15) days of the final event of the series. Events that fail to submit this report will be ineligible for a refund of overpaid sanction fees and are subject to denial of future sanction requests. Holders of an Elite Sanction must also submit required paperwork to the USATF National Office. (See Sanction Form and instructions regarding Elite Sanctions).

If a record is set at your event (road races on a certified course) you should obtain an "Application for Record" from [www.usatf.org](http://www.usatf.org). You should also electronically send your results to USATF. Results submission information is available at [www.usatf.org/groups/EventDirectors/](http://www.usatf.org/groups/EventDirectors/)

Name of event \_\_\_\_\_ Date(s) of Event \_\_\_\_\_

Site of event \_\_\_\_\_ City, State \_\_\_\_\_

Organizer of Event \_\_\_\_\_

- Check if appropriate:
- We adhered to USATF rules regarding safety precautions, medical supervision, athlete eligibility, officials, USATF name & logo use and course certification (as applicable).
  - All prizes and awards described in the entry information were awarded as promised.
  - Prize money is being held for athletes who were drug tested.
  - Please send me a First Report of Incident form.
  - Results have been submitted to USATF. Visit [www.usatf.org/groups/eventDirectors/](http://www.usatf.org/groups/eventDirectors/) for instructions on how to submit electronic results.

Pre-event estimate number of finishers: \_\_\_\_\_ Actual Number: \_\_\_\_\_

Sanction Fees Paid Prior to the event: Association \$ \_\_\_\_\_ Should have been \$ \_\_\_\_\_  
 National \$ \_\_\_\_\_ Should have been \$ \_\_\_\_\_

- Check the appropriate box:
- Please refund me \$ \_\_\_\_\_
  - Enclosed is additional payment of \$ \_\_\_\_\_
  - Pre-event estimates were accurate and no further exchange of payment is necessary

**Note:** Refunds of overpaid sanction fees will not be paid without a copy of the results. Enclose a copy of the results or indicate a website where the results can be found. **www.** \_\_\_\_\_

### Please make check payable to:

Name \_\_\_\_\_ Telephone Number ( ) \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_ Fax Number ( ) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### For Association Office Use Only

- Send national fee reimbursement directly to the event.
- Send reimbursement for the national fee to our office as we have already reimbursed the event.

Revised 11/07