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Description automatically generated

**This FORM 1 must be completed for all:**

* National Championship Events.
* Any other Event with more than 200 expected Entries at the close of Entries.
* Any other Event with > 150 Entries where at least 2 Classes/Divisions are at or exceed the maximum permitted Track Density.

The completed Plan must be returned to the organisation that will be issuing the Organising Permit for the Event - either the SKA or KA, at the time of submitting the Supplementary Regulations for the Event.

Note: If the Organiser plans to conduct more than one Event of the same status at the same venue, they may lodge a Common Medical Response Plan if the contents of that plan, foll owing review at suitable intervals, remains unchanged during a calendar year.

For the Specific Requirements applicable to your event type, please refer to the Karting Australia Manual, ***General Rules, Chapter 6 Medical Services at Karting Events***, at [**www.karting.net.au**](http://www.karting.net.au)

All sections of this form must be TYPED, and the form must be signed where indicated.

**EVENT DETAILS**

**NAME OF CLUB/ORGANISER:**

**DETAILS OF THE EVENT (Name & Number Of Days):**

**IS THIS A COMMON MEDICAL RESPONSE PLAN?**

**DATE OF THE EVENT or EVENTS:**

**EVENT VENUE:**

**EVENT STATUS (National, State, Zonal, Club):**

**TITLE**

**1. PURPOSE**

**2. PERSONNEL**

**3. VEHICLES**

**4. DEPLOYMENT**

**4.1 Personnel**

**4.2 Vehicles**

**5. THE MEDICAL FACILITY (Centre)**

**6. EQUIPMENT**

**7. COMMUNICATION**

**8. OPERATION**

**9. OTHER DETAILS**

**10. ATTACHMENTS (NOT INCLUDED IN THIS EXAMPLE)**

**NAME, POSITION, SIGNATURE AND DATE**

**Name:**

**Position:**

**Signature:**

**Date:**