



B.C.CARRIAGE DRIVING SOCIETY – EVENT SANCTIONING FORM

*This form is to be completed for each and every event or activity your zone/group is intending to have sanctioned by the B.C. Carriage Driving Society.

Type of event/activity: _____

Name of event/activity: _____

Date(s) and time(s) of event/activity: _____

Location of event/activity: (legal address) _____

City/town/municipality: _____ Zone(HCBC): _____

1. Name of official(s)/coach(s) _____

Phone number: (_____) _____ email address: _____

Mailing address: _____

City/town: _____ Postal code: _____

2. Name of official(s)/coach(s) _____

Phone number: (_____) _____ email address: _____

Mailing address: _____

City/town: _____ Postal code: _____

Name of contact person: _____

Phone number: (_____) _____ Cell number: (_____) _____

Email address; _____ BCCDS memb. # _____

The contact person is asked to report to BCCDS after the event/activity, all incidents and if there were no incidents, that should be noted and reported also. ALL incidents must be noted, even if no one is hurt and no damage is done. This is to protect BC Carriage Driving should someone submit a claim against the Society at a later date.