



UNIVERSITY SPORT SOUTH AFRICA

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USSA/4

REPORT FORM FOR HOST INSTITUTIONS

THIS FORM MUST BE RETURNED TO THE USSA NATIONAL SECRETARIAT
WITHIN THIRTY (30) DAYS AFTER THE TOURNAMENT. IT IS THE
RESPONSIBILITY OF THE NUSA TO ENSURE THAT THIS FORM IS RETURNED.

DETAILS OF USSA TOURNAMENT

SPORT :
TOURNAMENT TYPE :
DATE(S) :
HOST INSTITUTION :

1. COMPOSITION OF TOURNAMENT ORGANISING COMMITTEE

Convener :
Institution :
Tel / fax / e-mail :
Representatives of :
National University :
Sports Association :
Representatives of :
Host Institution :
and/or Province :

2. NATIONAL UNIVERSITY SPORTS ASSOCIATION

Chairperson :
Tel / fax / e-mail :

3. GENERAL REMARKS ON THE TOURNAMENT BY HOST

3.1 Did the participating institutions meet all deadlines in terms of submissions of forms?

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3.2 Did Institutions pay the required levies on time?

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3.3 Was the level of behaviour satisfactory from all participating institutions?

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3.4 Was the registration process well coordinated?

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3.5 Any other remarks?

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4. GENERAL REMARKS ON CO-OPERATION BY THE NATIONAL UNIVERSITY SPORTS ASSOCIATION (NUSA)

4.1 Was there early contact established between the NUSA and yourselves?

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4.2 Did the NUSA provide you with guidelines (e.g. budget, format, technical rules, etc.) for organising the tournament?

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4.3 Did the NUSA actively assist in running the tournament?

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4.4 Any other remarks?

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5. RECOMMENDATION BY THE HOST INSTITUTION

5.1 Would you consider the tournament to have been a success?

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5.2 Are there any suggestions you would like to make to improve the tournament?

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6. **TOURNAMENT RESULTS**

- a. Please attached full set of results and programme / fixtures

7. **CERTIFIED AS CORRECT**

Name of Sports Officer :

Signature : Date :

Convener of the Organising Committee:

Signature : Date :