

INCIDENT/ACCIDENT REPORT FORM

To be used to record any incident or accident that occurs at the Sorell Bowls and Community Club.

Use a separate form for each incident

Event/Function		Date
Name of person in charge	Role of the person in charge	
	Side Captain, President, Bar Manager, Umpire, Coach, etc	

Incident/Accident details

Type of incident (tick appropriate options)		
<input type="radio"/> Personal accident	<input type="radio"/> Damage to property	
<input type="radio"/> Health event (eg: heart attack)	<input type="radio"/> Other (specify below)	
Name of person(s) involved in the incident/accident		Time of incident
Was treatment given?	Was an ambulance called?	Were the police called?
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Name of person(s) giving treatment	Type of treatment given	
Details of the incident (be as specific and detailed as possible)		
Continue on back page if necessary ...		

Name of person reporting the incident/accident	Time of report