

# INCIDENT/ACCIDENT REPORT FORM

To be used to record any incident or accident that occurs at the Sorell Bowls 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)		

Name of person reporting the incident/accident	Time of report