



**INCIDENT/ ACCIDENT REPORT FORM**

**SPRINGBURN HARRIERS RUNNING & ATHLETICS CLUB**

Name of person in charge of session/competition:	
Site where incident/accident took place:	
Date of incident/accident:	
Time of incident/accident:	
Name of person injured:	
Address of person injured:	

**Nature of incident/accident and extent of injury including which area of the body was injured. Left or right etc.**

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**Give details of how and precisely where the incident/accident took place.**

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Describe what activity was taking place, example - training, getting changed, etc.

Give full details of the action taken including any first aid treatment and the name(s) of the first aider(s):

Were any of the following contacted:

Police:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ambulance:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Parent/carer:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

What happened to the injured person following the incident/accident? (example - went home, went to hospital, carried on with session)

All of the above facts are a true and accurate record of the incident/accident.

<b>SIGNED:</b>	
<b>NAME:</b>	<b>DATE:</b>

In the event of accident occurring through insufficient training or faulty equipment / facilities follow up action to include completion of Risk Assessment Form.

All Incidents / Accidents reports **MUST** be forwarded to the Board of Trustees.