



# U3A Sapphire Coast Inc. Incident/Accident Report form



*This form provides an internal record only, and is intended for the use of leaders or other persons in charge at U3A events. Please provide as much detail as possible. The form should be eventually given to and retained by the U3A SC Secretary, who will take any follow up action necessary.*

### Type of Incident

- |   |   |
|---|---|
| <input type="checkbox"/> Property damage            | <input type="checkbox"/> Injury to volunteers |
| <input type="checkbox"/> Lost/stolen property       | <input type="checkbox"/> Personal accident    |
| <input type="checkbox"/> Injury to Member of Public | <input type="checkbox"/> Other .....          |

### Incident Details *(please write clearly and if insufficient space, use other side of form)*

Date ..... time : ..... Location/venue : .....

#### Description:

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### Witness/es - Names and contact details

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### Person making report *(please print clearly)*

Name: ..... Position in U3A : .....

email : ..... Phone : .....

Signature .....

### Office Use only

Report received by U3A Secretary  .....  
*(date / comments)*

#### Follow-up Action taken :

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Incident Closed – Date .....