

CHARNEY HALL AND FIELD TRUST (CHAFT)

CHARNEY FIELD INCIDENT / ACCIDENT REPORT FORM

Please complete form and email to charneychaft@gmail.com or pass to any CHAFT trustee. If space is insufficient, please continue on the reverse of the sheet.

1. Date and time of incident /accident	Date	Time (approximate)
2. Name(s) and age(s) of person(s) involved (if under18, otherwise write "adult")	Name(s)	Age(s)
3. Where on the field exactly did the incident/ accident happen?		
4. What was going on at the time of the incident/ accident?		
5. What happened?		
6. Was any injury sustained? <i>If so describe what and to whom and any treatment required? Give contact details for parent or responsible adult.</i>		
7. Number of children present at time of incident / accident		
8. How many adults were present?		
9. If issue was equipment-related, describe any part of the equipment which was damaged or not working before or after the incident/ accident	Before:	After:
10. Name, date & signature of person completing report	Name	Signature and date

Follow up by CHAFT (for CHAFT use only)

Add here any additional information about incident / accident		
What action, if any, is needed to reduce the risk of recurrence	<i>(e.g. monitor situation, repair or modify equipment, provide additional signage)</i>	
Describe actions, if any, subsequently taken to reduce risk of recurrence		
Insert Date and signature when action completed	Name	Signature and date