

Chittlehampton Village Hall Accident Report Form

NAME OF CLUB OR ORGANISATION.....

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Name of person in charge of session/competition

Site where incident/accident took place

Date and Time of the accident/incident

Name of injured person

Address of injured person

Brief description and extent of injury

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

Describe the cause of the accident, what was happening and where it took place

Give details of any first aid treatment given and the name(s) of people who gave treatment e.g. first-aider(s).

Were any of the following contacted?



Parents/carers

Yes

No



Police

Yes

No



Ambulance

Yes

No

What happened to the injured person following the incident/accident?

e.g., carried on with session, went home, went to hospital etc.

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

Signed: **Date:**

Name:

Please report this accident to the Village Hall H&S Officer or a Village Hall Trustee