

INCIDENT/ ACCIDENT REPORT FORM

South Harpenden Allotments and Gardens Society

Site where incident/accident took place:

Date and time of incident/accident:

Name of injured person:

Address of injured person:

Nature of incident/accident and extent of injury:

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

Describe what activity was taking place:

Give full details of the action taken including any first aid treatment and the name(s) of the person who assisted, or the first aider(s):

Were any of the following contacted:

Police: Yes ☐ No ☐

Ambulance: Yes ☐ No ☐

Parent/carer: Yes ☐ No ☐

What happened to the injured person following the incident/accident? (e.g. went home, went to hospital, carried on with activity on the site):

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

SIGNED:

DATE:

NAME:

Incident reports should be reviewed by the Site Representative at the site inspections in May and July and a brief report sent to the committee. Serious incidents should be reported to the Secretary immediately so any remedial action can be taken
