

SPRING BAY BOAT CLUB INC.

Incident Report Form

To be completed as soon as possible after an incident (ideally within 24 hours)

Notification Details

Person making report	
Contact phone number	
Date of report	

Incident Details

Incident type			
People injured &/or involved			
Date of incident		Time of incident	
Club officer to whom it was first reported		Time reported	
Officer of the day (if during a Club event)			
Witness			
Witness			

Description of Incident (including Club Activity being engaged in at the time) – continue on back of sheet if not enough room below

Injury/Damage Details

Contributing Factors

Responsive Actions Taken (including Medical, Emergency Services, Police responses)

Action	By Whom?	When?

Sign- off

	Signature	Date
Person making report		

Sign off cont.	Signature	Date
Club official		

Office use:

Date received by SBBC	
Processed by (name/title of club officer)	
Australian Sailing numbers of people involved	
Name	Number