

Incident Reporting Form

Please enter information directly into this form, save the PDF file, and then send the saved file to smacflyers@gmail.com
You can also print the form, enter the information and then give the completed form to one of the Club Executive.

If you have photos or documents relating to the incident, please provide copies or image files with the incident report.

Date of incident:			Time of incident:					
AUS number of SMAC member reporting the incident:								
AUS number of person(s) involved in the incident (if not reporter):								
Name & contact details of spectator(s) involved in the incident:								
Location of Incident:		Pits, clubhouse, car park or acces	ess road - RED ZONE					
		Within 15m of the pilot flight line -	- YELLOW ZONE					
		Neighbouring property - outside fly	uring property - outside flying field - GREEN ✓ ZONE or RED ✗ ZONE					
		Flying field - GREEN ZONE						
Description of what hap	pened -	please provide specific and detail	led information:					
Description of what happened - please provide specific and detailed information:								
Was there an injury or n	nedical	condition? (member visitor pilot sp	pectator):					
Was there an injury or medical condition? (member, visitor pilot, spectator): □ NO □ YES AUS number of MAAA member(s) involved:								
Name & contact details of spectator(s) involved:								
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Was medical treatment required?	□ NO		First Aid		Medical Centre		Ambulance/Hospital		
If YES, please provide specific inform	nation:								
Was any property damaged? (aircraft, club property, vehicles etc.): □ NO □ YES									
If YES, please provide specific information:									
What could be done to prevent or reduce the likelihood of this happening again:									
Additional information:									