# The Deepings u3a - Incident report form

Please note that this form can be completed by a member of the Committee, a Group Leader, or the property owner and should be retained on file by the u3a committee in case of a claim and for a period of three years even if a claim appears unlikely.

1	Details	of the	Person	Completing	the Form
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Name	
Position	
Email	
Telephone	
Address	

#### 2 Details of the Incident

Date of incident				
Time of incident				
Where did the incident occur?				
Please state the reason fo	Please state the reason for the injured person or damaged property being there			
Please describe the circur	nstances of the incident			
Attach a sketch or photog	raph(s) if possible			

#### 3 Particulars of person(s) involved in the incident (continue on a blank page if necessary)

Name	Email	
Address		
Postcode	Telephone	
Was he/she a member of your U3A on the date of the incident?		
Name	Email	
Address		
Postcode	Telephone	
Was he/she a member of your U3A on the date of the	ne incident?	

## Section 4 is to be completed for any incident involving injury.

4 Details of injury
Describe the injury/injuries
Immediate action taken
Treatment at the scene
Admission to hospital
Ongoing medical treatment

## Section 5 is to be completed for any incident involving damage to property

5 Details of damaged property

Describe damage caused	
Estimated cost of repair or replacement Name of owner of damaged property	
Email	Telephone
Address	
	Postcode

#### Section 6 and the Declaration to be completed for ALL incidents

6 Name and contact details of any witnesses to the incident


#### 7 Declaration

I/We declare that to the best of my/our knowledge and belief all the foregoing particulars are true and correct in all respects.

Signed

Dated