



Harlow & Surrounding Areas  
"Learn, Laugh, Live"

## Incident Report Form

This form is to be filled in by a member of the committee, a group facilitator or property owner and should be retained on file by the Harlow U3A committee in case of a claim and for a period of three years even if a claim appears unlikely.

### A YOUR DETAILS

Harlow U3A	
Name	Position
Telephone	
Address	
Postcode	

### B INCIDENT DETAILS

Date of incident	Time of incident
Where did the incident occur?	
Please state the reason for the injured person or damaged property being there	
Please describe the circumstances of the incident Attach a sketch or photograph(s) if appropriate	

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**c 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 incident?	

Sections D and E are to be completed for any incident involving injury.

**D PARTICULARS OF THE INJURED PERSON(S) (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 incident?	

**E DETAILS OF INJURY**

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



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Section F is to be completed for any incident involving damage to property

**F DETAILS OF DAMAGED PROPERTY**

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

The remaining sections are to be completed for all incidents

**G NAME AND CONTACT DETAILS OF ANY WITNESSES TO THE INCIDENT**


**H 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

Form Updated May 7<sup>th</sup> 2020