

Upton & Lytchett u3a Incident Report

Issue 01 Feb 2023



This form is to be filled in by a member of the committee or a group leader, or the property owner if applicable. It should be retained on file by the U3A committee for at least three years.

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U3A	
Name	
Position	
Email	
Telephone	
Address	
Postcode	

2 Incident details

Date of incident	
Time of incident	
Where did the	
incident occur?	
Please state the reas	son for the iincident
Please describe the	circumstances of the incident
	otograph(s) if possible
Allacii a skelcii di pin	nograph(s) ii possible

3 Particulars of person or persons involved in the incident

(continue on a blank page if necessary)

(continue on a blaint page in necessary)	
Name	Email
Address	
Postcode	Telephone
Was he/she a member of your U3A on the da	te of the incident?



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

Sections 4 and 5 below are to be completed for any incident involving injury.

4 Particulars of the injured person(s)

(continue on a blank page if necessary)

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

5 Details of injury

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

Section 6 is to be completed for any incident involving damage to property

6 Details of damaged property

Describe damage caused





Estimated cost of repair or	replacement
Name of owner of damage	d property
Email	Telephone
Address	
	Postcode
_	
he remaining sections ar	re to be completed for all incidents
Name and o	contact details of any witnesses to t
ncident	
Declaration	
Decidiation	
	est of my/our knowledge and belief all the foregoing particulars
are true and correct in all I	
Signed	Dated