

Lenzie Tennis Club
Accident/Incident Report Form

Name of person in charge of session/competition

Site where incident/accident took place

Date of incident/accident

Name of injured person

Address of injured person

Nature of incident/injury and extent of injury

Give details of how and precisely where the incident occurred.

Describe what activity was taking place, e.g. training/game/getting changed.

Give full details of action taken during any first aid treatment and the name(s) of first aider(s).

Were any of the following contacted?

- | | | |
|--|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> Parent(s)/carer(s) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Police | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Ambulance | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

What happened to the injured person following the incident/accident, e.g. carried on with session, went home, went to hospital?

All of the above facts are a true record of the accident/incident.

Name:

Signed:

Date:

In the event of an accident/incident relating to training or faulty equipment/facilities, follow up action should include informing the President/any committee member of the accident/incident in line with the club's Health and Safety Policy. Details of this can be found on the website as well as the notice board.

Please submit to any committee member or email to lenzietennis01@gmail.com