

Trip Incident/Accident Report

Trip Leaders: Fill out form & report incidents to **Trip Coordinator**.

Incident Date: _____

Trip Leader: _____

Trip: _____

Name of person involved: _____

Age: _____ Gender: _____

Home address: _____

Phone: _____

What were relevant conditions when and where the incident occurred? (Wind, wave, and water conditions, weather, estimated air and water temperature, precipitation, visibility, how far from shore?)

Location of incident (estimate if necessary): _____

Describe in detail how the incident occurred? _____

If rescue was affected or attempted, describe: _____

Apparent nature of injury: _____

Is this a re-injury of an old condition? _____

Did injured person refuse first aid or evacuation? _____

Describe first aid given: _____

Who gave first aid? _____

Describe evacuation: _____

Apparent cause of incident: _____

Did injured person state that s/he contributed to incident in any way? _____ Describe statement and name witnesses to it. _____

Did any other person contribute to the incident in any way? _____ Describe. _____

Were there warnings or instructions not heeded? _____

Were any photographs taken? _____ By whom? _____

Were other persons injured in this incident? _____ Names: _____
(Fill out a separate incident form for each person.)

List names and contact information of witnesses to the incident on the third page. Get witness statements, as detailed as possible, from each.

Form filled out by: _____

Your signature: _____ Date: _____

