DURHAM CITY HARRIERS AND ATHLETIC CLUB



INCIDENT / ACCIDENT REPORT

Name of person reporting on incider	nt /accident.				
Site where incident / accident took p	olace.				
Date of incident / accident					
Name of injured person.					
Address of injured person.					
Nature of incident /injury and extent					
Give details of how and precisely wh					
Give full details of actions taken inclu	uding any first a	aid treatment	and nam	e(s) of fi	rst aider(s)
Who was contacted. Parents/ca	arers Y/N	Ambulance	Y/N	Police	Y/N
What happened to the person follow home, went to hospital etc.	-		_		
Signed as true record. Print nam	ne				
Signed		I	Date		

NB. Enter details in the incident / accident book held by Chair along with this form.