Thames Turbo Incident/Accident Report Form (Updated June 2020)

Is this issue related to: Health and Safety, Welfare, Other issue?

What was the nature of the incident? Accident, illness, near miss, other:

Date completing Incident Report:

(optional – reporting person can remain anonymous):
Name of person reporting incident

Address of person reporting incident:

Phone Number(s) of person reporting incident:

Date of incident:

Time of incident:

Site and exact location of incident:

Was anyone affected by the incident?

If so, who? Coach, member, Parent, other:

Name of person/people affected:

Address of person/people affected:

Telephone number of person/people affected:

Describe what happened:

What action was taken? Who took this action? Please state if parents/guardians/ next of kin were contacted – who was spoken to?

Follow Up Action Required (to be completed by club representative, please leave blank):

If completed offline, please email this form to the Welfare Officer (welfare@thamesturbo.co.uk) or the secretary (secretary@thamesturbo.co.uk) within 24 hours of incident. Remember to be discrete with information recorded and abide by the Data Protection Act.