Incident report form

| our contact details |
|---|
| Full name: |
| Contact number: |
| Email address: |
| ncident information |
| Date & time: |
| /enue: |
| Description: |
| |
| Outcome: |
| |
| Additional information |
| Relates to: |
| |
| Names of people involved (e.g. crew members): |
| |

| Detailed location: |
|---|
| |
| |
| Types of boats involved (if any): |
| |
| Was anyone hurt?: |
| |
| Were emergency services called? When and by who?: |
| |
| Who treated any injuries? Where was it done?: |
| |
| List any damage to equipment or property: |
| |
| |
| Names of coxswains, stroke seats, bow seats?: |
| |
| Was a coach present, who? Were they supervising people involved?: |
| |
| What lights were/were not on boats?: |
| |
| Weather, light level and other environmental info: |
| Trouble, figure over and care controlled into |
| |
| Witnesses: |
| |
| Are you uploading a drawing, photos or other document?: |
| |
| Have you already notified a Committee member? Who? How?: |
| |
| Are the people involved aware of this report submission?: |
| |
| I declare this to be a true and accurate record of the incident: |
| |
| CLUB USE: RQId Safety Officer informed?: |
| |

| CLUB USE: QLD Marine Incident Report required/submitted?: | | | | | | | |
|---|----------------|----------|-----------------|---------|--|--|--|
| | | | | | | | |
| CLUB USE: Follow up a | actions taken: | | | | | | |
| | | | | | | | |
| People involve | ed | | | | | | |
| Full name: | | | | | | | |
| Contact number: | | | | | | | |
| Email address: | | | | | | | |
| Role (please circle): | Complainant | Official | Person involved | Witness | | | |
| Full name: | | | | | | | |
| Contact number: | | | | | | | |
| Email address: | | | | | | | |
| Role (please circle): | Complainant | Official | Person involved | Witness | | | |
| Full name: | | | | | | | |
| Contact number: | | | | | | | |
| Email address: | | | | | | | |
| Role (please circle): | Complainant | Official | Person involved | Witness | | | |
| Full name: | | | | | | | |
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| Role (please circle): | Complainant | Official | Person involved | Witness | | | |
| | | | | | | | |