INCIDENT REPORT FORM TEMPLATE

Event Name:

Type of incident:

- ☐ General trespass
- ☐ Noise complaint
- ☐ Crowd incident
- ☐ Theft
- ☐ Damage to grounds
- ☐ Lost property
- ☐ First aid
- ☐ Emergency services required
- ☐ Emergency evacuation
- ☐ Slip/trip/fall incident
- ☐ Lost person
- ☐ Other (specify)
- ☐ Vehicle-related incident
- ☐ Suspicious article
- ☐ Unauthorised activities

Details of injured / affected person

Club member ☐

Member of public ☐

Given name/s | Surname

Residential address

Postcode | Telephone

Incident details

Date | Time

Location

Did you inspect the area? ☐ Yes ☐ No

What was evident?

Were police called? ☐ Yes ☐ No

Details of attendance/ officer/station

Was first aid provided? ☐ Yes ☐ No

Details of treatment

Was an ambulance requested? ☐ Yes ☐ No

Details of onsite treatment/hospital

overleaf

Details of how incident occurred

Description of incident (include specifics e.g. location, cause, witnesses, details of attending officers/ambulance, further treatment)

Name of person completing report	
Contact telephone number	
Signature	
Date reported	