

Warwickshire Geological Conservation Group

8 Accident/ Incident Report Form

Keep one copy and send the other to the Honorary Secretary

Date:	Leader:
Place:	
Description of Accident/ Incident (injury and/ or damage to property)	
In case of injury: Name: Position held: Nature of injuries: Treatment: Health Centre/Hospital/Home/Returned to work	
Name, address and telephone number of Witnesses:	
Photographic records: yes/ no	
Circumstances surrounding accident/ incident and H&S measures in force	
Action taken to prevent repetition	
Signature:	Date:

Note: any accidents or incidents should be reported to the Management Committee via the Honorary Secretary