

U3A Tauranga Inc

Incident Report Form

(Appendix C to Health and Safety Guidelines adopted 13.11.2020)

This form is to be completed by either an Executive member, a Group Co-ordinator or a Convener and then sent to the Health and Safety Officer as soon as possible for processing. Please use extra pages if required.

The original form is to be retained on file by the Secretary for three years.

A Details of person making the report (as above)

Name	U3A Position
Email	Telephone
Address	
Postcode	

B Incident details

Date of incident	Time of incident
Where did the incident occur?	
Describe the circumstances of the incident. Attach a sketch or photo if appropriate.	

C Particulars of person(s) involved in the incident

Person 1: Name	Email
Address	
Postcode	
Telephone	
On the date of the incident, was the person involved a U3A Tauranga member?	
Person 2: Name	Email
Address	
Postcode	
Telephone	
On the date of the incident, was the person involved a U3A Tauranga member?	

D Details of damaged property or equipment (if applicable)

Describe how damage to property/equipment occurred
Describe the actual damage to property/equipment

Estimate cost of repairs or replacement

Name of owner of damaged property/equipment

Email

Address

Postcode

Telephone

E Name and contact details of any witnesses to the incident

F Declaration: to be signed by member who completed section A above, and a witness if appropriate

I/We declare that to the best of my/our knowledge all the particulars noted are true and correct in all respects.

Signed

Dated

Signed

Dated