

Rotary District 1030 accident/incident report form**Rotary Club of Hexham**

Event

PART 1 - TO BE COMPLETED BY CLUB HEALTH & SAFETY OFFICER

Name of injured person	
Date and Time of incident	
Nature of injuries	
Cause of incident or near miss	
Actions taken	
Name of Rotarian in charge	
Names of witnesses	
Exact location of incident	
Name of Club H&S Officer	
Signature	
Any further action taken or issues to be resolved	

PART 2 - TO BE COMPLETED BY DISTRICT SAFETY OFFICERSafety Officer's Management Report:

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