## INCIDENT REPORT FORM

## Instructions

1. Please use this form to report any accidents, incidents, or near misses.

2. Complete the form immediately after the incident or arrange for someone to do it on your behalf.

3. Email the completed form to hisaactivities@uhi.ac.uk

4. Failure to submit this form may result in a club or society losing funding, insurance cover, or affiliation.

Note: A separate report form has to be completed for each individual who is injured as a result of an accident

## Accident/Incident Form

| Club / Society Name  |                               |
|--|-------------------------------|
| Trip, Event, Activity  |                               |
| DateTime   | 9                             |
| Location at time of Incident   |                               |
| What happened?   |                               |
|  |                               |
|  |                               |
|  |                               |
| What factors do we need to be aware of? (weather, local conditions, equipment etc) |                               |
|  |                               |
|  |                               |
|  |                               |
| Name and contact details of any witnesses (co                                      | ntinue overleaf if necessary) |
|  |                               |
|  |                               |



## Details of Injured Person

Received\_\_\_\_\_Community Engagement Manager

Date\_\_\_\_\_

