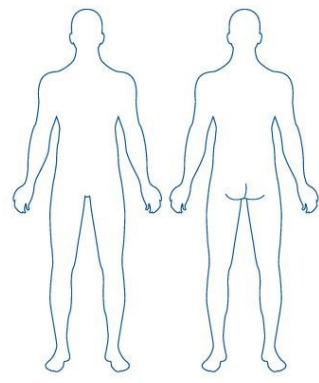


Incident Report

1. General information

Seriousness of incident: accident _____ near accident _____ other _____		
Date of incident _____	reported by _____	tour leader _____ name of tour _____
Place of incident _____	GPS co-ordinates: N _____ and W _____	
Description of incident _____		
Actions taken by leader _____		

2. Personal information — Please note that one form should be used for each person

Name of passenger _____ tel. no. _____ email _____		
Description of injury _____		
Please indicate the position of injuries on the drawings provided:		
Was the person transferred to hospital?	yes _____ no _____	
Person involved refused hospital treatment	yes _____ no _____	
Transported by ambulance?	yes _____ no _____	
Any other type of transport?	_____	
Were the police called to the scene?	yes _____ no _____	
Other rescue teams involved, which?	_____	

3. Passengers

Were any other group members in need of trauma support? yes _____ no _____

Was trauma support offered? yes _____ no _____ Passengers declined _____

Other actions taken concerning passengers _____

Witnesses to the accident:

Name _____ tel. no. _____ email _____ nationality _____

Name _____ tel. no. _____ email _____ nationality _____

Name _____ tel. no. _____ email _____ nationality _____

4. Organisation

Were directors of the company notified? Who? _____

Time of notification _____

Was the insurance company notified about the incident? yes _____ no _____

Other details which must be noted

Signature of person filing in the report

Signature of tour leader, if other

Actions taken in the wake of the incident, if any:
