

Incident Log Book Reference Number

Water Safety Code Incident Report Form

| Please complete this form to damage to equipment. Pleas Send the original to the Opera | e report incide | nts within 24 hours of | occurrence. | - |
|--|------------------|----------------------------|-------------|---------|
| Incident Date and Time (Month/DD/YY): | | - | Time: | AM PM |
| Your Name (incident contact p | person) | | | |
| Address | | | | |
| Phone: | | email: | | |
| Where did the incident occur? | | | | |
| Injury or Damage? (please click if YES) | | Injury | Damage | |
| Types of boats (row, paddle, 8 | 3, 4-, 1x, etc): | | | |
| Boats were (please tick) | Racing | Training | Other: | |
| Conditions: (please tick) | Light: | Daylight | Dusk | Night |
| Skies | Clear | Partly Cloudy | Overcast | Raining |
| Tide / Current | Low | Mid | High | |
| Wind & Water: | Calm | Intermediate | Nasty! | |
| Temperature: | | Wind Direction (if known): | | |
| Name of club or event reporting incident | | | | |
| Your role at the club or event | | | | |
| What clubs or other parties were involved? | | | | |
| Description: Please detail the parties? Please include or atta | ach any details | s (drawings / photogra | | |
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| List any injuries; who treated them, and where. |
| Please list any damage to boat(s) or property. |
| Add or attach any further information you think may be useful, e.g. list of witnesses with addresses etc. |
| What has been, is recommended, or will be implemented to avoid repetition of similar incidents? |
| Signatures: Date |
| Yours |
| Club Officer |