



Water Safety Code Incident Report Form

Incident Log Book Reference Number

Please complete this form to report any serious incident - involving injury to persons or significant damage to equipment. Please report incidents within 24 hours of occurrence. Send the original to the [President](#) or [Secretary](#) at **Bair Island Aquatic Center**.

Incident Date and Time: Month: Day: Year: Time: am/pm	
Your Name (incident contact person)	
Address	
Phone:	Work Home
Where did the incident occur?	
Injury or Damage? (please tick)	Injury Damage
Types of boats (row, paddle, 8, 4-, 1x, etc):	
Boats were ... (please tick)	Racing Training Other:
Conditions: (please tick)	Light: Day time Dusk Night
Skies	Clear Partly Cloudy Overcast Raining
Tide / Current	Low Mid High
Wind & Water:	Calm Intermediate Nasty!
Temperature:	Wind Direction (circle): N NE E SE S SW W NW
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 incident. If visibility was poor, what lights were being shown by all parties? Please include or attach any details (drawings / photographs) you feel will help.	
Please continue on additional or separate sheets if necessary.	



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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