



**FORM - PCAQ-20**

**Incident Report Form**

Incident details	Day and date: .....	Time .....	am/pm
	Location: At Pony Club authorised and controlled (type of event)..... held at .....	Weather	Conditions wet/dry.....

Description of incident (write everything that you can remember no matter how insignificant you think it may be): Please attach further sheets if necessary.

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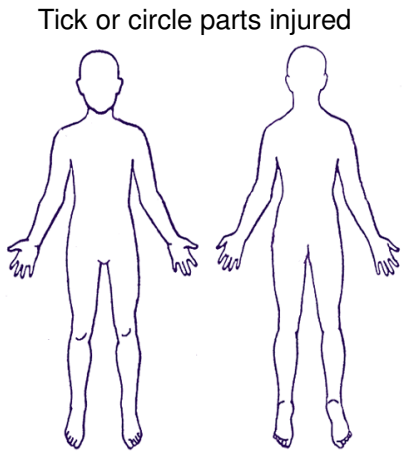
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Third parties Were there any third parties involved?	Yes/no If yes, name and address:.....
	Contact details: .....

Injured person is: a member or a guest or a volunteer (circle one)	Full Name .....	Date of Birth .....
	Address .....	Age in years .....
	Phone contacts: Home .....	Work .....
	Membership: Club .....	Date joined .....
		Mobile .....
		Postcode .....
		M/ship rec no .....

Was first aid given	yes/no	Describe the Injury: ..... ..... ..... ..... ..... ..... .....
Name of attendant:	.....	
Ambulance Called?	yes/no	
Taken to hospital?	yes/no	
Name of hospital?	.....	
Medical attention refused?	yes/no	
Did they rejoin the activity?	yes/no	
Was incident preventable?	yes/no	



Witnesses		
Name: .....	Address: .....	Phone: .....
Name: .....	Address: .....	Phone: .....

Report completed by: Name: .....	Position in Club: .....
on behalf of .....	Date: .....