

## ULVERSTON WALKING FESTIVAL – ACCIDENT / INCIDENT FORM

[The priority will be the health and safety of any casualty, and the rest of the party, but the following information may be useful for following-up any incident. Leaders could take a copy of this form or just be aware of the information ideally required.]

Type of Event (Accident [causing injury] or Incident [not causing an injury – eg livestock, dog chasing sheep, near miss, complaint]):	
Date of Event:	Time of Event:
Walk Number/Title:	
Location:	
Name of Injured Person:	
Contact Details of Injured Person:	
NOK / Nominated ICE - Name and Contact Details:	
NOK (or nominated ICE) notified: Yes/No	
Age of Injured Person (if under 18):	
First Aid Administered: Yes/No	Hospitalised: Yes/No Which Hospital:
Name of Walk Leader:	
Person Dealing with Casualty (if not the Walk Leader) - Name and Contact Details:	
Names and Contact Details of a Witness (in addition to the Co-leader):	

Description of Accident / Incident (What Happened):

Likely Cause of Accident:

Underlying Reasons why it May Have Occurred (Your Opinion):

Action Taken (self-help, first Aid administered, 999/Ambulance/MR called):

Any Other Relevant Information: