

## Appendix 6—Accident/Incident Report

Name of Child/Youth: \_\_\_\_\_

Group/Activity Child/Youth participating in: \_\_\_\_\_

Type of Incident:

\_\_\_\_\_ Discipline      \_\_\_\_\_ Injury or Illness      \_\_\_\_\_ Other

Date/Time/Location/Description of Accident/Incident: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reported by/Signature/Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_

Witnessed by/Signature/Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Actions Taken in Response to Report: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_