



POYNTON RAMBLING CLUB

Affiliated to the
Ramblers Association
(#342426)

Affiliated to HF Holidays

Member and Sponsor of the
Peak & Northern
Footpaths Society

INCIDENT REPORT FORM

Please complete this form for all incidents, whether deemed minor, serious, or a near miss whether outside assistance was required or not. The information supplied here is confidential and will assist Poynton Rambling Club to record and develop an overview of incidents and help us provide relevant guidance and training where appropriate.

Sections 1, 2 & 3 of this form must be completed for all incidents wherever possible by the person responsible for the activity. It must then be given to a committee member to sign and a copy kept by the Secretary.

If the incident is of a serious nature (i.e. required mobilization of any Emergency Services), please include as much information as is possible including sections 4 & 5 plus any supplementary information that may be relevant in Sections 6 & 7 and report it at the earliest opportunity to the Chairman of Poynton Rambling Club or, in his or her absence, the Secretary.

1. Person responsible for activity (e.g. walk leader) details

Forename	Surname
Address	
Phone No	Mobile No
E-mail address	
PRC Member? Yes/No	

2. Details of affected person

Forename	Surname
Gender	Date of birth or age if known
Address	
Phone No	Mobile No
E-mail address	
PRC Member? Yes/No	
Was medical attention or hospitalization required? If yes, what treatment was received and for how long?	

3. Brief Details of incident

Were emergency services called? Yes/No	Grid reference, W3W (if appropriate)
Location and time of incident	



POYNTON RAMBLING CLUB

What happened and actions taken.

What happened and actions taken.

4. Witness details, (may be required for Insurance or further investigations)

(If more than one please list on a continuation sheet)

Forename	Surname
Address	
Phone No	Mobile No
E-mail address	
PRC Member? Yes/No	

5a. Details of person making report (if same person named in Section 1 go to 5b)

Forename	Surname
Position/Role	
Address	
Phone No	Mobile No
E-mail address	

5b. Extra information from person making report

In your opinion is a claim likely to be made?	
Is there anything else you would like to add?	
Signature	Date

DATA PROTECTION ACT:

All information you provide on this form is treated by us as confidential and except to the extent required by law, we shall only use such information for the purposes of processing any resultant claim. Information you provide may be forwarded to our insurer for these purposes.



POYNTON RAMBLING CLUB

Continuation Sheet (if required)

6. Please clearly list the question number you are continuing.

--

7. Further Witnesses

Forename	Surname
Address	
Phone No	Mobile No
E-mail Address	
PRC Member? Yes/No	

Continue on blank sheets as required.