

## Incident report form

## Your contact details Full name: Contact number: **Email address: Incident information** Date & time: Venue: **Description:** Outcome: **Additional information** Name of LRC boat (one report per LRC boat): What was damaged? (please upload photos) (tick all that apply): Bow

| Stern  |
|--|
| ☐ Hull   |
| ☐ Canvass  |
| Riggers  |
| ☐ Oars   |
| Cox Box  |
| Other  |
| Who from LRC has the maintenance / incident been reported to?: |
|  |
| List LRC members using the boat:                               |
| Select the activity at the time:                               |
|  |
| List any other rowing clubs or third parties involved?:        |
| Water Conditions (incidents) (tick all that apply):            |
| ☐ Calm   |
| ☐ Choppy   |
| Rough  |
| ☐ Very Rough   |
| □ N/A  |
| Visibility (incidents) (tick all that apply):                  |
| Good   |
|  |
| Fair   |
| ☐ Poor   |
|  |
| □ Poor   |
| ☐ Poor ☐ Darkness  |

| ☐ No                    |             |          |                 |         |  |
|-------------------------|-------------|----------|-----------------|---------|--|
| Unsure                  |             |          |                 |         |  |
| Describe the nature of  | any injury: |          |                 |         |  |
|                         |             |          |                 |         |  |
| Cost of Repairs (Office | Use):       |          |                 |         |  |
|                         |             |          |                 |         |  |
| People involve          | ed          |          |                 |         |  |
| Full name:              |             |          |                 |         |  |
| Contact number:         |             |          |                 |         |  |
| Email address:          |             |          |                 |         |  |
| Role (please circle):   | Complainant | Official | Person involved | Witness |  |
|                         |             |          |                 |         |  |
| Full name:              |             |          |                 |         |  |
| Contact number:         |             |          |                 |         |  |
| Email address:          |             |          |                 |         |  |
| Role (please circle):   | Complainant | Official | Person involved | Witness |  |
| Full name:              |             |          |                 |         |  |
| Contact number:         |             |          |                 |         |  |
| Email address:          |             |          |                 |         |  |
| Role (please circle):   | Complainant | Official | Person involved | Witness |  |
|                         | ······      |          |                 |         |  |
| Full name:              |             |          |                 |         |  |
| Contact number:         |             |          |                 |         |  |
| Email address:          |             |          |                 |         |  |
| Role (please circle):   | Complainant | Official | Person involved | Witness |  |
|                         |             |          |                 |         |  |
| Full name:              |             |          |                 |         |  |
| Contact number:         |             |          |                 |         |  |
| Email address:          |             |          |                 |         |  |
| Role (please circle):   | Complainant | Official | Person involved | Witness |  |

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