

BCHW INCIDENT REPORT
(Submit to BCHW President within 7 days of incident)

Date and time of incident:

Location of incident:

Land owner or land manager:

Contact information for land owner or land manager:

Land owner or land manager notified (circle one): Yes No
Incident investigated by land owner or land manager (Circle one): Yes No
Contact information for land owner or land manager investigator:

BCHW chapter:

Activity (chapter ride, work party, etc.):

Name of person(s) injured:

Contact information for injured person(s):

Person(s) injured is/are BCHW member(s): Yes No

Liability Release signed(Circle one): Yes No Where filed?

Description of injury:

Extent of injury:

Medical assistance provided:

Other assistance provided:

Assessment of cause:

Current status of injured person(s):

Person reporting incident to chapter president:

Contact information for person reporting incident to chapter president:

Name(s) of witness(es):

Contact information for witness(es):

Witness statement(s) completed: Yes No

Attachment(s) of witness(es) statement(s): Yes No

Photographs taken: Yes No

Contact information for photographer(s):

Attachment(s) of photograph(s) Yes No

Statement(s) given: Yes No

Contact information for any individual(s) given a statement:

Submitted to BCHW by:

Contact information:

Date: