

This form is only to be completed by the event organiser, promoter, a referee, a club executive, or someone undertaking a similar role and must be completed as soon as possible at the time of the accident/ incident.

For issues of a Child Protection nature, please use an 'INCIDENT RECORD FORM'

Club Details:-

Club Name:	Glenrothes A Swimming Club		
Name: (person completing this form)			
Position/Role:			

Athletes Details:-

Name:			
Date of Birth:		Membership No.:	

Accident Details:

Date of accident:			
Venue:			
Describe below exactly:			
What happened?			
What action was taken?			
What action needs to be taken?			

Consider:

Do you need witness statements?			Yes	No
Who do you need to inform?			Date advised:	
Venue Operators?	Yes	No		
Scottish Swimming?	Yes	No		
Insurance Company?	Yes	No		
Parents/ Guardians?	Yes	No		
Travel Company?	Yes	No		
Event Organisers?	Yes	No		
Legal Assistance?	Yes	No		

Signed:	
Date:	

Please send the completed form to Anna Tizzard, Glenrothes Swimming Club, Child Well-being and Protection Officer by emailing GASCCWPO@yahoo.com. If you wish to post, please call 07860 916206 for the address. This form should be sent to Anna Tizzard within 48 hours of the incident. A copy of the incident form will also be sent to Scottish Swimming.

Remember to maintain confidentiality on a *need to know* basis – do not discuss this incident with anyone other than those who need to know.