



INTERNAL ACCIDENT REPORT FORM
For use by Group Leaders/Nominated Person

SECTION A

Accident entered at the time of incident at the Premises where the accident occurred.

Obtain Premises' H.S.E. Accident Book

Insert Form No.

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Name of Injured Person

Premises Address

SECTION B - On reverse

To be completed when the accident has not been entered into a Premises' H.S.E. Accident Book. (This is to ensure a record is kept)

SECTION C

To be completed for all accidents:

Name of Group

Name of Group Leader/Nominated Person

Address of Group Leader/Nominated Person

Please attach

- a. A list of all members present when the accident occurred
- b. Any additional information e.g. Photographs.

FOR U3A OFFICIAL USE

Accident entered into U3A H.S.E. Accident Book

Date:

By:

Follow up action required Yes / No

Action taken by:

Date:

Completed form to be handed to U3A Secretary for attachment to U3A H.S.E. Accident Book.

Contact details on Newsletter