**ACCIDENT REPORT FORM**

**For issues of a Child Protection nature, please use an ‘INCIDENT RECORD FORM’**

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| Your name: |
| Your position: |
| Athlete’s name: |
| Athletes’ Date of Birth: |
| Date of accident / incident: |
| Venue: |
| **Describe below exactly:**What happened?What action was taken?What action needs to be taken? |
| **Consider:****Do you need witness statements?****Who do you need to inform? Date advised:**Venue operators? Scottish Swimming? Insurance company? Parents / guardians? Travel company? Event organisers? Legal assistance? |
| Signed: |
| Date: |

**A copy should also be sent to Scottish Swimming on** **childprotection@scottishswimming.com** **within 48 hours of incident.**

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