BRENTWOOD HARD COURT TENNIS & PADEL CLUB





| Name of person in charge of session/competition | | | | |
|--|--|--|--|--|
| | | | | |
| Site where incident/accident took place | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| Date of incident/accident | | | | |
| | | | | |
| Name of injured person | | | | |
| | | | | |
| Address of injured person | | | | |
| ridaress of injures. person | | | | |
| | | | | |
| Nature of incident/injury and extent of injury | | | | |
| Nature of melacity injury and extent of injury | | | | |
| | | | | |
| | | | | |
| Give details of how and precisely where the incident occurred. | | | | |
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| Describe what activity was taking place, e.g. training/game/getting changed. | | | | |
|--|--------------------|-----|----|--|
| | | | | |
| | | | | |
| Give full details of action taken during any first aid treatment and the name(s) of first aider(s) | | | | |
| | | | | |
| | | | | |
| Were any of the following contacted? | | | | |
| ✓ | Parent(s)/carer(s) | Yes | No | |
| ✓ | Police | Yes | No | |
| ~ | Ambulance | Yes | No | |
| What happened to the injured person following the incident/accident? e.g. carried on with session, went home, went to hospital | | | | |
| | | | | |
| | | | | |
| | | | | |
| All of the above facts are a true record of the accident/incident | | | | |
| Name | | | | |
| Signed | | | | |
| Date | | | | |