



Jungle Kids Ltd

Incident/accident report form for Jungle kids/Jungle Camp

Name of Staff

\_\_\_\_\_

Where incident/accident took place

\_\_\_\_\_

Date of incident/accident

\_\_\_\_ / \_\_\_\_

\_\_\_\_ /

Name of injured person

\_\_\_\_\_

Address of injured person

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Nature of incident/injury and extent of injury

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Give details of how and precisely where the incident/accident took place.

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\_\_\_\_\_

Give full details of action taken during any first aid treatment and the name(s) of first-aider(s).

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Were any of the following contacted?

Parents/carers                      Yes / No

Police                                      Yes / No

Ambulance                              Yes / No

What happened to the injured person following the incident/accident?

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All of the above facts are a true record of the incident/accident

Signed: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name: \_\_\_\_\_

**Jungle Kids Ltd**