



INCIDENT REPORT

Name of Group: _____ Date of Incident: _____

Names of group leader(s) involved: _____

What happened? _____

Where did it happen? _____

List the building and exact location

Was anyone hurt, or was something damaged? If so, please share details.

Actions taken: _____

Were there any witnesses? Did anyone take pictures? If so, please list their names and phone numbers. _____

What else needs to be done, such as pastoral care, cleaning, repair, etc.?

Anything else we should know? Please use the back to tell us more.

