



Cransley Sailing Club

Eagle Lane, Cransley, NN1 1PR
www.cransley.org.uk



Accident or Near Miss Incident Report

Name and role of person completing this form:

X

Incident Date and Time:

X

Names of Persons Involved:

X

Witnesses:

X.

Description of incident:

X.

Injuries, First Aid and NHS treatment / Emergency Services:

X

Follow Up Action:

X.

Signature:

Date:

The completed form should be placed in the Incident file and be brought to the attention of the Commodore.