



Oregon Women's Sailing Association

PO Box 17615
Portland, OR 97217

Incident Report

Today's date: _____

Instructions:

Call the Activity Leader by phone within 24 hours of incident to make a verbal report.

Complete all sections of the form and fax or email to Activity Leader within 48 hours.

Please print legibly. To be filled out by involved party.

Your Name: _____ Date and time of incident: _____

Your contact information: _____

Activity you were participating in: _____

If applicable:

Name of Boat: _____ Boat Owner Name: _____

Contact info for Boat Owner: _____

Names and contact info of others involved and/or present:

Type of incident: (please circle all that apply) Damage Injury Other

Briefly describe incident (Please include factual information: Who, What, When, Where.

Also include contact info for anyone mentioned unless already):

Follow up actions taken (First aid, medical care sought, reports made, etc.):

Recommendations for future activities (use the back if needed):

Person notified, how notified and date and approximate time notified:

Call the Activity Leader by phone within 24 hours of incident to make a verbal report.

Complete all above sections of the form. Fax or email to Activity Leader within 48 hours.

Stop here. Section below filled out by OWSA.

Form received by Activity Chair (name): _____ Date received: _____

Form reviewed by Vice Commodore (name): _____ Date reviewed: _____