

Incident Report Form

To be completed in the event of an incident which results in an injury or health & safety issue (or near miss) involving a member of your tour group. Please send the completed for to us by email to: contact@absolutetravel.co.uk as soon as you can after the incident. This will help us to review this at the earliest possibility and ensure any learnings and action at our end. Thank you in advance.

Group Name	Group Leader Name				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Tour Dates	Booking Ref				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Date of Incident	Time of Incident				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Location of Incident					
<input style="width: 99%;" type="text"/>					
Name of Individual(s) receiving medical treatment and date of birth					
FULL NAME:					
<input style="width: 99%;" type="text"/>					
DATE OF BIRTH:					
<input style="width: 99%;" type="text"/>					
Full Details of Incident/Accident					
<input style="width: 99%;" type="text"/>					
Details of treatment received if any?					
<input style="width: 99%;" type="text"/>					
Name and Contact Details of Doctor or Clinic					
<input style="width: 99%;" type="text"/>					
Was the incident reported to: Coach Driver? Hotelier? Police? Please give details.					
<input style="width: 99%;" type="text"/>					
Anyone Else Involved?	Name of any Witnesses?				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Could the incident have been avoided and/or measures be taken to avoid a reoccurrence?					
<input style="width: 99%;" type="text"/>					
Form Completed By	Position/Status (e.g. Teacher, Rep)				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Signed	Contact Number				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
Address	Email Address				
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>				
For Official Company Use Only					
Entered to log by	<input style="width: 200px;" type="text"/>	Date	<input style="width: 100px;" type="text"/>	Log No.	<input style="width: 100px;" type="text"/>
Action Taken:					
<input style="width: 99%;" type="text"/>					