



AUSTRALIAN POWER BOAT ASSOCIATION

National Authority Affiliated with the Union International Mononautique

Non – Racing Incident Report

ACTIVITY			
VENUE			
ORGANISING BODY			
DATE		TIME	
MEMBERS / GUESTS / VOLUNTEERS INVOLVED IN INCIDENT			
1.			
2.			
3.			
4.			
5.			
6.			

Person Making Report	
Position Held	
Contact Phone Number(s)	

Non-Racing Incident Report

This Form has been designed to gather information and to suit a number of situations. Include any information that you feel is also relevant, on a separate sheet if necessary. Some information asked for may seem unnecessary, but it may enable us to pick out any trends occurring in our sport.

Weather Conditions	
Water Conditions	

Details of Incident

Attach additional documentation if insufficient space

Describe in Detail, the Assistance Provided

Was any medical assistance required. Give details

Person 1

Name	
Address	
Contact Number	

Person 2

Name	
Address	
Contact Number	

Person 3

Name	
Address	
Contact Number	

Person 4

Name	
Address	
Contact Number	

Person 5

Name	
Address	
Contact Number	

Person 6

Name	
Address	
Contact Number	

PLEASE ENCLOSE COPIES OF ANY DRIVER, RESCUE PERSONNEL, OR EYEWITNESS REPORTS OR STATEMENTS, VIDEOS OR PHOTOGRAPHS OF THE INCIDENT.

**Is the race committee able to determine the cause of the incident.
If so, please give details?**

Suggested Actions Required by the Club

Discussed with Committee on -	
Final Recommendation	

Completed By _____ Date Action Completed - _____