

WALKABOUT INTERNATIONAL INCIDENT REPORT

Title of walk _____ Location _____

Date _____ Walk Leader name _____

Phone number _____ email address _____

Injured party name _____ phone # _____

Email address _____

In case of emergency contact information

Description of incident (details, additional information can be written on back of form)

Witnesses (Name, contact info, walker or non-walker - what did they see or hear, were photos taken)

What action was taken and by whom?

Follow up action: Date report sent to office _____ Feedback from injured person _____
