

GYMEA PEOPLES CHURCH

INCIDENT REPORT FORM

Confidential

Send to: The Pastor
GyMEA Peoples Church
P.O. Box 216
GYMEA NSW 2227

1. **Event:** _____

2. **Organiser:** _____

Address: _____

3. **Nature of Incident**

☐ Illegal act (e.g. drugs, stealing, assault, sexual)

Please specify: _____

☐ Person sent home

☐ Serious leader dispute

☐ Other. Please specify: _____

4. **Details of person/people causing incident**

Surname (Capitals): _____ Given names: _____

Sex (M/F) ☐ Date of Birth: _____ Phone (H): _____ (W) _____

Private address (Street, location, postcode): _____

Surname (Capitals): _____ Given names: _____

Sex (M/F) ☐ Date of Birth: _____ Phone (H): _____ (W) _____

Private address (Street, location, postcode): _____

Surname (Capitals): _____ Given names: _____

Sex (M/F) ☐ Date of Birth: _____ Phone (H): _____ (W) _____

Private address (Street, location, postcode): _____

5. **Where did the incident occur?:** _____

6. **Were any pertinent instructions given before the incident? (Please specify):**

7. **Were any warnings given before the incident? (Please specify):**

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Witness name: _____ Position: _____
Address: _____
Phone: (H) _____ (W) _____

Witness name: _____ Position: _____
Address: _____
Phone: (H) _____ (W) _____

Witness name: _____ Position: _____
Address: _____
Phone: (H) _____ (W) _____

Parent/Guardian notified? [] Yes [] No

Photographs of accident site taken? [] Yes [] No

Police notified? [] Yes [] No

(Name of officer: _____ Phone: _____)

If any other organisations have been notified, please state details:

11. Signatures

Supervising leader: _____ Signature: _____ Date: _____

Director: _____ Signature: _____ Date: _____

Person writing this report: _____ Signature: _____ Date: _____