



4-H Event/Activity Incident Report

This report is to be used by 4-H Volunteers, 4-H Event/Activity Coordinator(s), Event/Activity Chaperones and staff to document facts and actions regarding participants or staff who may become ill, are injured, who may break the rules, who have lost valuables, or who might have an additional issue of concern. Use the back side if additional space is needed.

Participant Name

County

Person Reporting

Time and Date of Incident

Nature of incident or problem:

Witnessed by (other adults consulted or involved):

Observations by others regarding the incident:

Action(s) taken (in ordered, detailed description):

If Parents/Authorities were contacted, describe conversation, noting names, date and time:

Disposition of incident:

Medical treatment that may have been necessary:

Signature of Person filing report

Date

Signature of Witness/Reviewer

Date

Signature of Participant

Date