Australian Association of Live Steamers Incident Report (2 pages)

To be completed and submitted within seven days of the incident.

The issue of this form is not an admission of liability, and is issued without prejudice

(If completing by hand, please PRINT clearly using CAPITAL letters)

Club Name:	
Date & Time of	
Incident:	
Where did the incident	
occur? (location in the	
grounds, track, train, as	
relevant)	
How did the incident	(If insufficient room, attach a separate sheet of paper)
occur?	
Marahana invalved and 4	hain malas (duinan annud ata).
Members involved and t	heir roles (driver, guard, etc):
Has there been an indica	tion that a claim will be made? (If so, name and address of
person making this indication.)	tion that a claim will be made. (19 50, name and dadress by
<u> </u>	
Was the incident reporte	ed to the police?
Name of officer:	
Station Notified:	
Witnesses (members): (P	lease provide name and address for each)
Witnesses (other than me	embers): (Please provide name and address for each)

(please turn to page 2)

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Details of injured partie	s: (Provide name, address, and nature o	f injury)
Name:		Child/Adult:
Address:		
Nature of Injury:		
Name:		Child/Adult:
Address:		
Nature of Injury:		
Name:		Child/Adult:
Address:		Ciliu/Aduit.
Nature of Injury:		
rvature or injury.		
Was First Aid rendered	and/or an Ambulance called:	
Details of assistance rende		
Details of any damage	(Provide name, address, description of	property and nature of
to property:	damage.)	
 All communication recrepresentatives must be your own insurance off not respond to them y In all cases, regardless 	of who your insurer is, a copy of th man, Australian Live Steamers Saf	this incident or their surance Officer, AALS on S Insurance Scheme). Do
I,(enter your name ar hereby declare and warrant	nd position on your club's executive that the foregoing particulars are to	re) true.
Date:	_ Signed:	
Phone Number:		
Email Address:		