Yorkshire Dales Sailing Club

NEAR MISS/ INCIDENT REPORT

DATE	TIME OF INCIDENT	REPORT FILLED IN BY
LOCATION OF INCIDENT	WHO WAS INVOLVED	WITNESSES?
EGG/(TIGIN OF INCIDENT	Name(s)	WITHESSES.
	Name(3)	
	Age Club Member?	
Description of what assumed		
Description of what occurred		
Name (Print)	Signature	Date
Please inform Commodore -Paul Hi	ll 07980649238 /Erica Caswell 075994	05771 /other Committee Member
TO BE COMPLETED BY CLUB SAFETY	OFFICER OF NOMINATED COMMITTE	EE MEMBER REVIEWING INCIDENT:
ACTIONS REQUIRED:		
To be reviewed urgently?	To be reviewed at next Committee Meeting?	
Need to report to H&S Exec/ RYA/	Marine Accident Investigation Board/	Child Safeguarding Officer?
Outline of Outcome of Review of t	this incident:	

Lessons Learnt:
Actions Required:

Actions completed? (Please tick)	Date
Name (Print)	Signature