



Incident/Accident Form

This form is track of injuries/incidents that occur during a 4-H activity or event. All club leaders and staff should have the forms on hand at *all* 4-H events and activities. This is to be turned in to the Extension Office and signed by the Volunteer in-charge, Club Leader, parent/guardian and an Extension Educator within 3 days. Copies can be made for club leaders and parents/guardians. The original will stay on file in the Extension Office. Forms will be kept on file in the county office until authorized to be destroyed.

- Incident Defined: An incident could be harassment, hazing, bullying, inappropriate language, a threat (verbal, physical, mental), inappropriate use of electronics/internet, etc.
- Accident Defined:
 1. Bump, sprain, scrape, cut, scratch, etc. needing attention/medication.
 2. Bug bite, sunburn, headache, stomachache, etc. needing attention/medication.
 3. Emergencies or medical treatment requiring professional attention.
 4. Accident involving car, equipment, ATV, bicycle, tractor, boat, animal, etc.

Information in this report is for the injured person or person(s) involved in an incident

Check one: <input type="checkbox"/> Incident <input type="checkbox"/> Accident		
Name:	Date:	Time:
Age:	4-H Club:	
Responsible Volunteer/Extension Educator:		
Name of Investigating Officer/Response Personnel/Doctor:		
Clinic/Hospital/Facility/Business Name:		
Location as well as site details:		
Total number of persons (youth and adults) Involved _____		
Names of all persons (youth and adult) directly involved:		
Type of Injury/Accident/Incident:		

What action/first aid/treatment was taken?

Describe accident/incident in detail. Include witnesses.

Were the parents or guardians informed of incident or accident? Yes No
If no, why not?

Other pertinent information:

Signature of Volunteer in Charge Date

Signature of Club Leader Date

Signature of Extension Educator Date

Signature of Parent/Guardian Date