

Hobart Hackerspace Incident, Injury, Accident or Near Miss Report

Instructions

- Ensure the safety and wellbeing of all participants as a priority.
- Complete all the details on this form.
- Post the completed form in the Incident Report letterbox, or email a copy of the form to committee@ hobarthackerspace.org.au
- Notify the President via email at president@hobarthackerspace.org.au as soon as possible.
- Do not admit liability or indicate the Hobart Hackerspace or its Insurer will meet any claims.

Please complete the relevant information in this Incident Report Form.

Nature of the Incid	lent						
Details of Person	n(s) Inv	volved					
First Name				Last Name			
Street Address				·			
Suburb			Postcode			Mobile	
Email							
Details of the Incident, Injury, Accident, or Near Miss							
Date				Time			
Location							
How did the Incident / Accident Occur?							
Describe the Injury / Offence							
Describe the Treatment							
or Actions Taken							
Name of Any Person Providing Support				Was the Pe First Aid Q		Yes 1	No Don't Know
Emergency Call(s)		Ambulance		Polic		☐ Fi	re Brigade
Witness Name				Mobile		1	
Name of Person							
Completing this Fo	orm						
Signature					Date		