

INCIDENT REPORT

All reports of accidents, incidents, injuries, or leadership problems are to be sent to the Sagamore Council, BSA office on this form.

NAMES/ADDRESSES OF PERSON(S) INJURED:

1. _____ 2. _____

Phone: _____ Phone: _____
Date of Birth: _____ Date of Birth: _____
Parents Name: _____ Parents Name: _____

TYPE OF INCIDENT:

() Sickness: _____ () Theft: _____
() Accident: _____ () Fire: _____
() Lost Person: _____ () Leadership Problem: _____
() Other: _____

LOCATION:

() Cary Camp Campsite: _____
() Camp Buffalo Campsite: _____
() Cub Day Camp Campsite: _____
() Webelos Resident Camp Campsite: _____
() Cub Resident Camp Campsite: _____
() Day Camp Location _____
() Council Service Center () Other: _____

INCIDENT HAPPENED DURING:

() Summer Camp Program () District/Council Activity:
() Day Hike Location: _____
() Short Term Camping Trip Specify Activity: _____
() Scheduled Meeting of:
() Tiger Den () Cub Den () Webelos Den
() Cub Pack () Patrol Meeting () Troop Meeting
() Venture Meeting () Other Meeting: _____
(Specify Meeting)

Was a Tour Permit filed? () Yes () No Tour Permit No. _____

Date of Incident: _____ Day of Week: _____

Time of Incident: _____ () AM () PM

Was a trip to the hospital required? () Yes () No

Name of hospital: _____

Nature of Injury (If any) _____

How could this accident have been prevented: _____

Action taken to prevent this accident from reoccurring: _____

SAGAMORE COUNCIL
(765) 452-8253

BOY SCOUTS OF AMERICA
FAX (765) 459-5625

Witness(s):

1. _____

2. _____

Phone: _____

Phone: _____

Description of Incident:

First Aid Given (if any):

Contacted: Police Fire Ambulance Scout Executive Unit Leader
 Chartering Partner: _____
 Parent(s): _____

Damage or Loss of Property (if any):

Time Log (if required):

Other Important Facts:

Person Filing Report:

Name: _____ Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Signature: _____ Date: _____

Please mail completed form to Sagamore Council, BSA, PO Box 865, Kokomo, IN 46903-0865

SAGAMORE COUNCIL

BOY SCOUTS OF AMERICA

INCIDENT REPORT INSTRUCTIONS

To reduce loss of life, limb, and financial assets, it is important that incidents involving serious injury or loss of life during a Scouting activity be reported. With this, action can be taken, if possible, to prevent reoccurrence of accidents and/or reduce risk, to volunteers and Scouters.

Please complete this report with as much detail as possible, make a copy for your records, and mail the original to:

Sagamore Council
PO Box 865
Kokomo, IN 46903-0865

If necessary, those listed on this report will be contacted for additional information.