## SSA INCIDENT REPORT

Complete this form, take picture and email to CRSO and slide under the door of the computer room (behind AED).

**CONTACT** Greg Lynch, Chief Range Safety Officer, as soon as possible at 908-619-9601; email <u>safety@shongum.org</u>, in addition, please contact any other club officers.

Any incident, accident or injury, however minor, which occurs on club property, must be formally written up

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Full Name								
SSA Card	Number							
Home Address								
Contact Phone								
Contact Email								
INCIDENT INFORMATION								
			MODERT IN ORMATION				Check (Y/N)	
Date:	Date:				Police Contacted:	Yes	No	
Weath	er Condition	s:			EMS Contacted:	Yes	No	
Name & C Person(s) i incident	ontact of involved in							
Name & Contact Phone / Email of Witness								
Name & Contact Phone / Email of Witness								
Descri	ption of Inc	ident Inclu		pened,	what led up to the event and what took	place, be as des	scriptive as	
Circi	le Incident A	rea						
<ul> <li>Indoor Range</li> <li>Outdoor 100 Yard</li> <li>Trap House</li> <li>Pistol Pit</li> <li>Archery Range</li> <li>Parking Area</li> <li>Picnic Area</li> <li>Club House</li> <li>Other</li> </ul>								
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