

Howell Twp. Recreation Department Accident / Incident Report

Major Emergency Toll Free 1-877-297-2532 Office 732-938-4500 ext.2501 Fax 732-938-6945

Date: _____ Time: _____ Program & Facility _____

Name _____ Age _____ Phone Number _____

Address: _____

Describe Exactly What Occurred Prior To And Including The Accident / Incident. Please Use Precise Details. *Note Location Of Accident & Staff (Continue On Back If Necessary):

Describe in detail the specific injury or damage caused:

Describe the immediate action taken and by whom: _____

Name and phone number of Witnesses: _____

Did participant return to activity? Yes _____ No _____ Rec Dpt Notified _____

Notified Parents Signature: _____ Date _____

Or

Authorized Adult's Signature: _____ Date _____

Site Director's Signature: _____ Date _____

Witness Signature: _____ Date _____

****Written report must be filed with the Recreation Department within 24 hours.**