

## Notification of Accident/Minor Injury Form

Date: \_\_\_\_\_

Child's Name \_\_\_\_\_

Type of Injury:

\_\_\_\_\_

First Aid Provided:

\_\_\_\_\_

Date and Time of Injury/Accident:

\_\_\_\_\_

Location and Cause of Injury/Accident:

\_\_\_\_\_

Person Providing First Aid:

\_\_\_\_\_

Parents notified: (when / by whom)

\_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Person Presenting Form for Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Note: In the case of serious injury or death, a BSAC Incident Report Form must be submitted to the Diving Officer for onward transmission to BSAC.**