

APPENDIX G

**ACCIDENT/INCIDENT REPORT
SOUTHMINSTER PRESBYTERIAN CHURCH**

Today's Date: _____

Name of Injured Party: _____

Home Address: _____

Home Phone Number: _____ Cell Phone Number: _____

E-Mail Address: _____

THE ACCIDENT:

Date: _____

Site: _____

Description of the accident (and injury, if applicable): _____

Names and phone numbers of witnesses to accident: _____

Did you seek emergency or other medical care? If so, where and when? _____

Additional comments, if desired: _____

Report Completed by: _____ Phone Number: _____

Forward completed report to Chair, Personnel Committee, Southminster Presbyterian Church, 7001 Far Hills Avenue, Dayton, OH 45459.