

**SCOTTISH COMMUNITY DRAMA ASSOCIATION**

**ACCIDENT / INCIDENT REPORT FORM (Youth)**

**For use during festival/workshop/production or drama club meeting**

**Date and Time of incident .....**

**Place.....**

**Leaders/Organisers /Adults present.....**

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**Participants.....**

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**Description of accident/incident ( please give as much detail as possible)**

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(Continue on a separate sheet if necessary.)

**Signature of person reporting incident.....**

**Print Name.....**

**Date of report.....**

**Please pass a signed copy to your designated Child Protection Officer and one to SCDA National Office.**