



Probos of Blue Mountain – Cycling Incident Report

Name of Injured Person

Description of Incident and Injury

Action Taken

Bandage	<input type="checkbox"/> Y	<input type="checkbox"/> N	Describe
Call 911	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Police	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Call Emergency Number on Waiver form	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Inform Ride Leader	<input type="checkbox"/> Y	<input type="checkbox"/> N	

Location of Incident

Post Incident

Did Injured Person:

Continue Ride Afterwards	<input type="checkbox"/> Y	<input type="checkbox"/> N	
Get a ride home	<input type="checkbox"/> Y	<input type="checkbox"/> N	From Whom _____
Get transported to Hospital	<input type="checkbox"/> Y	<input type="checkbox"/> N	Hospital _____

Contact Club President & Ride Coordinator

Signed _____ Dated _____