



Accident report form

1. Scheme details

Walk leader(s) name(s):

Name of scheme:

Date of accident:

2. Details of injured person

Full name:

Phone/mobile number:

Address:

Injuries sustained:

3. Details of accident

Location and time of accident:

What happened? Please give as much information as possible:



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What action was taken? If medical attention was sought, please mention this and what treatment was received as a result.

If injuries were sustained, is a full recovery expected?

4. Signatures

Walk Leader:

Witness:

Please email the completed form to walkingforhealth@ramblers.org.uk or post to The Ramblers, Walking for Health team, 2nd Floor, Camelford House, 87-90 Albert Embankment, London SE1 7TW