

## The Roxy Theatre Incident Protocol and Reporting Form (page 2)

<b>INCIDENT REPORT</b>	This form can be used for any incident: theft, damage, injury, etc.
Name of Reporting Party	
Role/Job Title	
Address	
Phone number – home and work	
Email	
<b>INFORMATION RE: INCIDENT</b>	
Nature of the Activity	
Location of Incident	
Date & time of the Incident	
Name of leader in charge at time	
If <b>THEFT</b> , details of suspicious parties	
Description of Incident	

Witness Name & contact numbers:	
Was this incident reported to police?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, Police Station Name & Number	
Name number of responding officer	
Was insurance company contacted?	Yes <input type="checkbox"/> No <input type="checkbox"/> Agent Contacted:
<b>INJURED OR DISORDERLY PERSON</b>	
Name	
Address	
Person's home phone & work	H: _____ W: _____
Person's email	
Describe nature of injury or disorderly behaviour, and actions taken	
Name of doctor & hospital if applicable	
Phone number of hospital or clinic	
<b>INFO ON DAMAGED PROPERTY</b>	
Name object(s) affected	
Describe damage	

Date form received: \_\_\_\_\_ Receiving party: \_\_\_\_\_

Actions taken:

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_