

**HENRY COUNTY PARKS AND RECREATION DEPARTMENT
INCIDENT REPORT**

DATE: _____ / _____ / _____ **TIME:** _____ **AM / PM**

LOCATION OF INCIDENT: _____

ACTIVITY INVOLVED: _____

NAME OF PARTICIPANT: _____

ADDRESS: _____

PHONE: _____ **E-MAIL:** _____

**ACTION OF PARTICIPANT:
WITNESS:**

NAME: _____ **PHONE:** _____

NAME: _____ **PHONE:** _____

NAME: _____ **PHONE:** _____

**ACTION OF SUPERVISOR:
COMMENTS:**

SUPERVISOR'S SIGNATURE: _____