



**British Columbia
Competitive Trail Riders Association**

Safety Report Form

In the event of an incident occurring at a sanctioned BCCTRA event, someone on ride management should complete the following form submit to the BCCTRA Secretary, Mary Carr 5735 Takala Road, Ladysmith, BC V9G 1M2 as part of their final report.

Your name: _____ Phone: _____

Address: _____

Email address: _____

Participant involved in the incident (person at risk):

Name : _____ Phone: _____

Address: _____

Email address: _____

Date of the incident: _____ Time: _____ (am/pm)

Location of the incident: _____

Weather conditions at the time of the incident: _____

Describe what happened in the incident:

Were any other people present who could describe what happened? YES NO

If yes, please provide an incident report from each using this form.

If the incident was horse related provide the following information.

Horse name: _____ Horse age: _____ Breed: _____

Name of horses' owner: _____ BCCTRA member? YES NO

Address of owner: _____ Phone _____

Was the horse "in hand" or "loose"?

Describe any physical problems of the horse that may have been a contributing factor to the incident.

Your signature: _____ Date: _____