

Walking for Pleasure

Witness report form

Details

Walking club name

Walk Leader's name

Name of casualty

Witness details

Name of witness

Address

Postcode

Phone

Home

Work/mobile

Incident details

Date of incident

Place of incident

Time of incident

Description of incident

Action taken by leader

Signature of witness

Date

For more information call

13 13 02

www.dsr.nsw.gov.au

