



The American Driving Society, Inc.

ADS Recognized Event Incident Report

Type or print neatly. To be completed by the TD or Safety Officer and returned with the TD Report, no later than 7 days after the event. If a serious incident occurs (injury to or death of a horse or competitor, or significant property damage) immediately contact ADS Executive Director Abbie Trexler at (530) 902-8065.

Name of Event: _____ Date(s) of Event: _____

Address of Event: _____

Name of Official(s): _____	Judge	TD
_____	Judge	TD
_____	Judge	TD
_____	Judge	TD

EMT: _____ Phone #: _____ Email: _____

Vet: _____ Phone #: _____ Email: _____

Date of Incident: ____/____/____ Time of Incident: _____ AM PM

Incident Location: Outdoor Ring Indoor Ring Stabling Area Parking Area
Cross Country Course Other: _____

List those involved in the Incident:

Name: _____	ADS #: _____	Phone #: _____	Email: _____
Driver	Groom	Official	Volunteer
Spectator	Other: _____		
Name: _____	ADS #: _____	Phone #: _____	Email: _____
Driver	Groom	Official	Volunteer
Spectator	Other: _____		
Name: _____	ADS #: _____	Phone #: _____	Email: _____
Driver	Groom	Official	Volunteer
Spectator	Other: _____		
Name: _____	ADS #: _____	Phone #: _____	Email: _____
Driver	Groom	Official	Volunteer
Spectator	Other: _____		

List witnesses to the Incident (Include their role at the event, i.e. driver, groom, official, volunteer, spectator, etc.):

Name: _____	Phone #: _____	Email: _____	Role: _____
Name: _____	Phone #: _____	Email: _____	Role: _____
Name: _____	Phone #: _____	Email: _____	Role: _____
Name: _____	Phone #: _____	Email: _____	Role: _____

Did incident involve an injury or property damage?	Yes, driver	Yes, groom
Yes, passenger	Yes, another person	Yes, equine
		Property Damage



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Explain Incident in detail, including those people listed above:

Required: Follow-up to incident (include injury follow-up and any other pertinent details):

Name of submitting official:

Signature:

:

Date: