



Motherwell Athletics Club

Welfare Incident Report Form

Please use additional sheets and attach evidence as necessary.

	Person reporting the incident	Person recording the incident
Name		
Role in athletics		
Address		
Telephone number		

Location of incident (if relevant)	
Date of incident	
Name of any individual(s) who dealt with the incident at the time	
Nature of incident	

** Please return this form to the following Welfare Officer:

Stephen Irwin

stephenirwin@motherwellac.com