



**Pleasant Valley
Recreation and Park District**

1605 E. Burnley Street, Camarillo, CA 93010
Phone: (805) 482-1996 Fax: (805) 482-3468 www.pvrpd.org

ACCIDENT REPORT Date of Report: _____

Person's Name: _____ Age: _____ Sex: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Date of Accident: _____ Time: _____ Facility: _____

Program: _____ Employee in Charge of Facility/Program: _____

Disposition: Home: _____ Hospital (Name): _____

Doctor: _____ Other: _____ Taken By: _____

Ambulance Service (Name): _____

Description of Injury: _____

Part(s) of Body Injured: _____

Description of Accident: _____

Describe First-Aid Administered: _____

Witnesses

Name: _____ Phone: (_____) _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: (_____) _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: (_____) _____

Address: _____ City: _____ State: _____ Zip: _____

ACCIDENTS: All accidents must be reported to the District Office (482-1996) immediately.

Report completed by: _____ Title: _____ Date: _____

Supervisor Signature: _____ Date: _____

General Manager Signature: _____ Date: _____

Risk Manager Signature: _____ Date: _____