



Complete and return to: SANS, 5516 Spring Garden Road, 4th Floor • Halifax, Nova Scotia B3J 1G6  
• (902) 425-5450, ext. 324 • Fax: (902) 425-5606

SNOWMOBILERS ASSOCIATION OF NOVA SCOTIA

## SNOWMOBILE TRAIL INCIDENT REPORT FORM

<b>Club Name</b>		
<b>Injured Party</b> (Indicate whether member or not)	<b>Name</b>	
	<b>Address</b>	
	<b>Telephone</b>	
<b>Accident Location</b>		
<b>Type of Injury (Person or Property)</b>		
<b>Date of Injury</b>		
<b>Time of Injury</b>		
<b>Indicate if injuries were Fatal</b>		
<b>Indicate if care was refused</b>		
<b>Care Given</b> (Indicate whether on-site, personal transportation or ambulance assisted with details)		
<b>Type of Injury</b> (Body part or type of property, Details of injury, i.e. sprain, concussion, fracture, laceration)		
<b>Occasion</b> ( Trail Ride, Event, Other)		
<b>Situation</b> Snowmobile collision with: (Please indicate) Tree, Other snowmobile, vehicle, person, etc.		
<b>Location:</b> (Indicate Road, Trail, Off trail, supply details with pictures, map and GPS coordinates, if possible)		
<b>Activity of injured</b> (Indicate whether operating, passenger, social, other with details)		
<b>Activity of Injured if off Snowmobile</b> (Indicate whether Fall, slip, trip, hit by person, hit by snowmobile)		
<b>Special Circumstances and Details</b>		
<b>Detailed Accident Description</b>		
<b>Witness</b> (Names, Address, Telephone)		
<b>Respondent's Name</b>		
<b>Address</b> <b>Telephone</b> <b>Email</b>		