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Insurance and Risk Management Services provided for:

Website: www.holmanins.com Telephone: 905-886-5630 Toll Free: 1-800-567-1279 Fax: 905-886-5622

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RCABC Incident Report Form

IMPORTANT NOTE:

Recreational Canoeing Association of BC Instructor or Club Member: To be used for reporting Bodily Injury or Property Damage to a third party (Holman Insurance). Please fill out the form completely, print it out and sign and date at the bottom. Send it to the RCABC Exectutive and Holman Insurance ASAP by fax, scan and email or mail and follow up to verify it has been received.

GENERAL INFORMATION				
Club /Instructor Name :			Location	
Contact Name:				
Telephone:	Fax Number:	Email a	address:	
DETAILS OF CLAIM				
Date of Loss:	: Time of Accident:			
Circumstances:				
Type of Injury or Third party Damage:	Name of Event:			
Location of Accident:	Ambulance at Scene? Yes No			
WITNESS				
Name:	Address:		Telephone#	
POLICE CONTACT INFORMATION				
Police Contacted? Yes No	Name of Policy (Officer:	Police Badge #	
Police File #	Division #		Telephone#	
Type of Injury:	<u> </u>			
OTHER PARTY / WITNESS INFORMATION (IF APPLICABLE)				
Other Party Name:		Street Address:		
Telephone:		ı		
City:	Province:		Postal Code:	
PRIVACY: Have you read Holman Insurance Brokers Ltd. privacy policy, which is available at www.holmanins.com ? Do you consent to the collection, use, disclosure and retention of your Personal Information as set out in the Privacy Policy, and do you understand that you may (subject to certain restrictions and consequences) later withdraw your consent as to any or all of the purposes identified in that Policy? By signing this form you are consenting to the statements above.				
Name (please print):	e print):		Title:	
Signature:	Date (Mon/dd/yyyy)			