

**General Incident Report  
Central Presbyterian Church**

Event/ Program: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Incident: \_\_\_\_\_

\_\_\_\_\_

Where: \_\_\_\_\_

What happened: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Response: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Filled out by: \_\_\_\_\_

When: \_\_\_\_\_

Signed: \_\_\_\_\_

*Once this form is filled out, please make a copy of the form and give the copy to the individual or parent/guardian upon pick up and file the original with Nancy Hilton in the office.*