



Serious Incident Report at an Event

(Confidential - USEA use only)

Name of Competition: _____

Location: _____ Date: _____

Organizer: _____ Phone: _____

President of Ground Jury: _____

Technical Delegate: _____

Rider/Owner: _____

Horse's Name: _____ Level: _____ Age: _____

Scene of Accident: Check one of the following:

Parking Area Warm-Up Dressage Show Jumping Course Cross-Country (course level) _____

Type of fence: _____ Dimensions of fence: _____

Brief description of accident:

Brief statement from at least three witnesses including fence judge(s):

1.

2.

3.

In case of rider accident, brief statement from official medical officer:

In case of horse accident, brief statement from official veterinarian:

Signature President of Ground Jury: _____ Date: _____

Signature Technical Delegate: _____ Date: _____

Signature Organizer: _____ Date: _____