



Burlington Swim and Tennis Club
 1 Country Club Lane, Burlington MA 01803
 781-272-9837
gobstc@gmail.com



Club Incident Form

(To Be Completed by Member or Lifeguard on duty within 24 Hours of an Incident or Injury)

Reporting Member Contact Information

You're Name (Required) _____

Your Phone Number (Required) _____

Your Email address (Optional) _____



Incident Information:

Date and time of Incident: _____

Name of Lifeguard on duty: _____

Names of parties involved: _____

Name of other members that witnessed incident: _____

Description of Incident: *Please be as descriptive as possible.* _____

Signature: _____ Date: _____

I certify the information I have furnished on this form is true, correct, and complete to the best of my knowledge.

Please send completed form to gobstc@gmail.com.