

Endsleigh Insurances (Brokers) Ltd  
Hadley House  
Shurdington Road  
Cheltenham  
Glos GL51 4UE

Tel No: 01242 866789

Fax No: 01242 866961

Email: [sports@endsleigh.co.uk](mailto:sports@endsleigh.co.uk)

## **INCIDENT NOTIFICATION ADVICE FORM**

CARE SHOULD BE TAKEN TO INCLUDE AS DETAILED AN ANSWER AS POSSIBLE TO ALL QUESTIONS

### **Insured Member**

Full Name  Daytime Tel No

Home address  BAB Ins Cert No   
Post Code  Date Valid from   
Date Valid to

Name of Association (in full)

Please advise if you are a member of any other Association. If so, quote full name

### **Accident/Incident**

Date of accident  Time of the accident

Place

How did the accident happen? Describe the circumstances.

### **Details of Injured Person(s)**

Name  Age  Occupation

Home address:   
Tel No:

### **Details of Injury**

**Details of Property Damage**

Name	Address
Tel No	
<b>Full Details of Damage</b>	

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Has blame been "apportioned? YES  NO

If "YES" state by whom and in what circumstances:

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In your view, who is responsible for the incident?

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Please outline any implied or actual threat of legal action arising out of the incident:

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**WITNESSES** (if available): Give name, address and tel no

1.	2.	3.

Any additional information / comment / opinion (in confidence):

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Signature		Name		Position/ Appointment In Club / Association	
		Date			

**DECLARATION TO BE COMPLETED BY CLUB / ASSOCIATION OFFICIAL**

Name	Address
Tel No	
<b>Position in Club &amp; Association:</b>	

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Is the claimant a current Club or Association Member?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Did the accident take place whilst participating in insured activity?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Do you confirm all the above information is correct to the best of your knowledge?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

If any answers are stated as "NO", please explain:

Signature		Date	
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This form to be sent to the British Aikido Board Secretary: Mrs Shirley Timms, 6 Halkingcroft, Langley, Slough SL3 7AT (tel: 01753 577878) (fax: 01753 577331) who is then to send the form by recorded delivery to:

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