



Incident Report Form

Date of incident: _____

Location and time of incident: _____

Name of person submitting report: _____

Name of pets involved: _____

Name of owners involved: _____

Was there any need for medical attention to any people? If so provide detail and names. _____

Was there any need for medical attention to any of the pets involved? If so provide detail and names. _____

Details of the incident: _____

Was the Team Lead on site? _____ If not, why?

Was there a representative from the facility present at the time of the incident, or were they made aware of the situation after? _____

Was the emergency cell for PALS called? If not, why? _____

ALL DOG/DOG, CAT/DOG, CAT/CAT, DOG/PEOPLE, CAT/PEOPLE OR PEOPLE/PEOPLE INCIDENTS MUST BE REPORTED TO THE OFFICE IMMEDIATELY.

Following any major incident all PALS volunteers and their pets are suspended from visiting until they received approval to resume visiting from the Executive Director.

This form can be email to diana@palspets.com or fax to 403-250-9273.