${\bf Injury\ Report-Safari\ Nation}$

Date of Injury:	Person Injured:	
Time of Injury:	Age of Injured:	
Date Injury Reported:	Parent of Injured:	
Method Injury Reported:	Form completed by:	
Waiver signed:	Employees on duty:	
warver signed.	Employees on daty.	
Injury Key:	Action Taken:	Cause of Injury:
Foot Left Right	Ice	Violation of safety rules
Ankle Left Right	Bandaid - Wrap	Aggrivated old injury
Finger 1 2 3 4 5 Thumb L R	Rest - elevation	Another person – rough play
Wrist Left Right	Parent notified	Improper use of equipment
Leg Left Right	Outside medical attention sought	Equipment failure
Sprain:	Ambulance called (911)	Employee neglect/rough play
Bruise – Location:		
Details & Action Taken:		
Follow-up:		
•		
Date:		
Date: By:		
Date: By:	Not held liable – results of active	Filed with Liability Insurance Date:
Date: By: Liability Information		Filed with Liability Insurance Date:
Date: By: Liability Information	Not held liable – results of active play	Filed with Liability Insurance Date:
Date: By: Liability Information None – minor bump or bruise		Filed with Liability Insurance Date:
Date: By: Liability Information None – minor bump or bruise Requested to pay out of pocket		Filed with Liability Insurance Date:
Date: By: Liability Information None – minor bump or bruise		Filed with Liability Insurance Date:
Date: By: Liability Information None – minor bump or bruise Requested to pay out of pocket		Filed with Liability Insurance Date:
Date: By: Liability Information None – minor bump or bruise Requested to pay out of pocket expenses.		Filed with Liability Insurance Date:
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Date: By: Liability Information None – minor bump or bruise Requested to pay out of pocket expenses. Release of Liability agree to release Safari Nation and all of njury was not the result of any willful neg	fficers & employees of any further liability of glect by Safari Nation but the possible result	f the above documented injury. This t of an active play environment. Safari
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Response / Other Details: