

Hide-A-Way Hills Club
RR 1 Box 1
Hide-A-Way Hills OH 43107
740-569-4195 --- 740-569-4036 Fax
740-569-4187 --- 740-746-9589 Security

MISCELLANEOUS INCIDENT REPORT

This form is for use by a member, guest or employee to complete

COMPLAINANT'S NAME _____

COMPLAINANT'S ADDRESS _____

COMPLAINANT'S PHONE _____

DATE OF INCIDENT _____ TIME OF INCIDENT _____ AM/PM

LOCATION OF INCIDENT _____

DETAILS OF INCIDENT: (Please write legibly and be specific. Include names of those involved and any witnesses present.)

Report completed and filed by _____

Please print name here and then sign below

Signature _____ Date _____

If more space is needed, please use back side or attach a paper.