BALLROOM FIT

Ballroom Fit Incident Form

Details of person reporting incident:

Name: ..... Phone: .....

Address: ..... Email: .....

If you are completing the incident form on someone else's behalf their details:

Name: ..... Phone: .....

Address: ..... Email: .....

What happened and action taken:

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Class and venue:

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Date of class: ...../...../..... Time: .....

Signature of person completing the form:

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Date incident form signed by person completing the form:

...../...../.....

Ballroom Fit coach signature:

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Date incident form signed by Ballroom Fit coach:

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