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 138 Gannet Drive | South Portland, ME 04106
 888-922-4763 | girlscoutsofmaine.org
 customercare@gsmaine.org

Accident or Illness Report

Complete in case of an accident (food poisoning, sudden illness, broken bones, stitches, head injuries, trip to the hospital, fatality) and send within 48 hours of the incident to the GSME Director of Information Systems at customercare@gsmaine.org

Accident/Illness

Date of incident _____ Date of report _____

Name of person making report _____

Position _____

Troop/service unit _____ Phone _____

Activity

Type of activity _____

Adults in charge _____

Description of location (*draw sketch on back if necessary*) _____

Injured party (or parties)

Name	Girl Scout Member?	Age	Type of Injury
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

Were the injured parties transported to a hospital or medical facility? YES NO
 If YES, how? Name and location of facility _____

Please describe first aid given, if any, and by whom _____

Please explain the order of events leading to the incident _____

Witnesses

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Have you completed a GSUSA insurance form? YES NO

If YES, on what date was your form submitted to GSME? _____