



This form is to be completed by a Basso Kids Ministry Leader whenever mild medical attention is provided to a child, or to bring a matter to the parents' attention (such as a scrape, need for band aide or possible bruise).

The completed form should be provided to the parent, and a copy returned to Basso Church, Administration Officer (Kerry Jacques) via email:

[admin@bassochurch.org.au](mailto:admin@bassochurch.org.au)

### GENERAL INFORMATION

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Time of incident: \_\_\_\_\_

Child's name: \_\_\_\_\_

### DETAILS:

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### THIS IS HOW WE TREATED IT:

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Leader Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_      Parent Signed: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please take a copy of the completed form.  
Original to parent, copy returned to Basso Church, Administration Officer  
(Kerry Jacques) via email: [admin@bassochurch.org.au](mailto:admin@bassochurch.org.au)

**Office Use Only:**  
Form to be scanned and filed.