www.bpa.org.uk

Wharf Way, Glen Parva, Leicester, LE2 9TF.

Tele: 0116 278 5271, Fax: 0116 247 7662, e-mail: skydive@bpa.org.uk

INCIDENT/ACCIDENT WITNESS (OR PERSON INVOLVED) STATEMENT

PARACHUTE TRAINING ORGANISATION (PTO)/DISPLAY TEAM:

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Name of Person making Statement	Address	Contact details (Telephone numbers, e-mail address etc)
BPA membership no/FAI no/BPA Licence no (if applicable)	Ratings/Qualifications (if applicable)	Number of jumps

- Please refrain from talking to others about the incident until you have completed and returned this statement.
- Record where you were, what you saw and give as much detail as you can on what happened. Include how far from the incident you were and any other factors that you think would help to explain the events. If in doubt, please seek advice from a BPA instructor.
- If you were wearing a video or camera that may have captured the event, please mention that in this statement and tell the CI immediately.
- If you have an opinion on a specific fact (e.g. what caused the incident) please write it down but clearly indicate which part of the statement is opinion and which is fact.
- If you think anyone else saw the incident, that hasn't been asked to provide a witness statement, please record their name (and contact details if you know them) in this statement.
- If you need to use more than one page please number, sign and then staple <u>each</u> page together before handing the statement in.
- This statement may be used as part of an investigation and may be shared with various authorities such as; the police, CAA, insurers etc. A copy of the BPA Data Protection Policy is available on our website at www.bpa.org.uk for full data subjects rights and our responsibilities.

STATEMENT:

Signed	Date	Time

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BRITISH PARACHUTE ASSOCIATION

Signed_____

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Wharf Way, Glen Parva, Leicester, LE2 9TF. **INCIDENT/ACCIDENT WITNESS (OR PERSON INVOLVED) STATEMENT (continuation sheet)** Page: PTO/DISPLAY TEAM: Name of Person making Statement_____ Statement cont'd:

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Date_____

Time_____