3D Archery Association of Australia

ABN 37 082 971 439

AFFILIATIONS: INTERNATIONAL BOWHUNTING ORGANISATION

From the Office of:
The Secretary
8 Happy Valley Rise
Diamond Creek Vic 3089

3DAAA Insurance Broker
Marsh Pty Ltd
PO Box 2637
Adelaide SA 5000

PERSONAL INCIDENT REPORT FORM

Please forward all relevant information known to you. Any correspondence received or documents served on you must be forwarded immediately [unanswered] to the insurance brokers address above and a copy sent to the Association. Please use additional pages if insufficient space.

Injured persons name: .....

Postal Address: .....

Date of incident: ..... **Time of incident**: ..... **3DAAA No:** .....

Place of incident: .....

Nature of event being conducted: .....

Describe the circumstances of the incident: .....

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Person/s injured: ..... **3DAAA Membership No:** .....

Address: .....

..... **3DAAA Membership No:** .....

Address: .....

Property damaged: .....

Owner:..... **Address:**.....

Witnesses: ..... **3DAAA Membership No:** .....

Address: .....

..... **3DAAA Membership No:** .....

Address: .....

Signature:.....**Date:** .....

Print Name:..... **Relationship to the injured:** .....