## **Hospitality Guest Injury Report**

## **Guest Information** Full Name Room/Reservation Number Phone Number **Email Address Incident Details** Date of Incident Time of Incident Location of Incident Description of Incident **Injury Details** Describe the Injury Treatment Given (if any) **Witness Information** Names of Any Witnesses Witness Contact Information

## **Staff Reported To**

Starr Name						

Position/Title			
Date Reported			
Time Reported			
Additional Comments			