PERFORMANCE INJURY REPORT

(Do not remove from handbook. Use for photocopying, if needed.)

Every injury to a crew member, patron or actor that results in a performance cancellation or intervention by MERT must be documented on the following form. Please submit the form to Nigel Maister not later than 24 hours after the injury.

NAME OF INJURED ___________________________________    TEL. NUMBER: ____________________

DATE OF INJURY________________________  PRODUCTION______________________________

DESCRIPTION/NATURE OF INJURY __________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

INJURED PARTY WAS (circle the appropriate):        A STUDENT       STAFF MEMBER        GUEST/VISITING ARTIST/PATRON

IF A STUDENT, WAS S/HE AN (circle the appropriate):         ACTOR        CREW MEMBER        AUDIENCE MEMBER

WHAT STEPS WERE TAKEN AFTER THE INJURY OCCURRED (provide names, if possible)? ______________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

ADDITIONAL COMMENTS BY STAGE MANAGER: ________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

SIGNED/DATE (FRONT-OF-HOUSE MANAGER)      S IGNED/DATE (STAGE MANAGER)
______________________________             ____________________________

Updated 4/1/09 at 2:03 PM