WSIB Insurance Agency, LLC

INCIDENT REPORT

PROMOTER	National Auto Sport Association
TRACK	
SANCTIONING BODY / PROMOTER	NASA Rally Sport
EVENT TYPE	DRAG ☐ OVAL ☐ ROAD COURSE ☐ OTHER ☐ _____
VEHICLE TYPE	STOCK CAR ☐ OPEN WHEEL ☐ DRAG ☐ BOAT ☐ KART ☐ MOTORCYCLE ☐ OTHER ☐ _____
TRACK SURFACE	ASPHALT ☐ DIRT ☐ OTHER ☐ _____
INCIDENT DATE	DATE _____ TIME _____ AM ☐ PM ☐
INJURED PERSON	DRIVER/RIDER ☐ OFFICIAL ☐ CREW MEMBER ☐ SPECTATOR ☐ OTHER ☐ _____
NATURE	BODILY INJURY ☐ PROPERTY DAMAGE ☐ OTHER ☐ _____ FATALITY ☐
WAIVER SIGNED	YES ☐ NO ☐
LOCATION OF ACCIDENT	GRAND STANDS ☐ PIT AREA ☐ ON TRACK ☐ PARKING LOT ☐ STAGING AREA ☐ RETURN AREA ☐ OTHER ☐ _____
NAME OF INJURED PERSON OR PROPERTY OWNER	NAME _____ ADDRESS _____ CITY _____ STATE / ZIP _____ DAYTIME PHONE _____ CELL PHONE _____ AGE _____ DOB _____ MALE ☐ FEMALE ☐
VEHICLE	YR _____ MAKE _____ MODEL _____
INCIDENT DESCRIPTION	DESCRIBE WHAT HAPPENED
DESCRIPTION OF INJURY	
HOSPITAL	TRANSPORTED TO HOSPITAL YES ☐ NO ☐ ADMITTED TO HOSPITAL YES ☐ NO ☐ UNKNOWN ☐ HOSPITAL NAME _____ TRANSPORTING AMBULANCE SERVICE _____ ADDRESS, CITY, STATE

WITNESSES	Witness 1	Witness 2
NAME		
ADDRESS		
PHONE		

REPORTED BY			
NAME	John Lindsey	TITLE	General Counsel
ADDRESS	15 Entrada Circle	CITY	American Canyon
PHONE	213-705-1120	STATE/ZIP	94503

PLEASE SUBMIT FORM TO:

WSIB Insurance Agency, LLC ● 10319 Dawson's Creek Blvd. ● Suite J ● Fort Wayne, IN 46825 ● Email: claimreporting@wsibinsurance.com