



***Finger Lakes Soaring, Inc.***

**SAFETY REPORT**

**DATE** \_\_\_\_\_ **TIME** \_\_\_\_\_

**WEATHER CONDITIONS ( if relevant )**

**LOCATION**

**DESCRIBE INCIDENT / SITUATION**

**( Discuss what you feel is relevant and important. Include what you believe was the cause of the incident. Also include what can be done to prevent a recurrence or correct the situation - if you have ideas. Continue on next page if needed )**

**WITNESSES ( IF ANY )**

**NAME** \_\_\_\_\_  
( OPTIONAL )

**MAIL TO:**  
**Finger Lakes Soaring**  
**C/O Linda Evenski**  
**254 Boca Ave.**  
**Rochester, NY 14626**  
**585-720-0656**