

# Accident/Incident Report Form

Name of person in charge of session/competition		
Site where incident/accident took place		
Date of incident/accident		
Name of injured person		
Address of injured person		
Nature of incident/injury and extent of injury. Include details of how and precisely where the incident occurred.		
Describe what activity was taking place, e.g. training/game/getting changed.		
Give full details of action taken during any first aid treatment and the name(s) of first aider(s).		
Were any of the following contacted?)	Parent(s)/carer(s)	YES NO
	Police	YES NO
	Ambulance	YES NO
What happened to the injured person following the incident/accident? e.g. carried on with session, went home, went to hospital.		
All of the above facts are a true record of the accident/incident	Name	Signature
	Date	

In the event of an incident/accident relating to training or faulty equipment/facilities, follow up action should include informing the committee of the incident/accident in line with the place to play maintenance policy.