



Accident/incident report form

Name of person in charge of session/competition:

Maggie North

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:

Give details of how and precisely where the incident took place:

(Describe what activity was taking place, for example 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?

Parents/carers 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 etc.)

All of the above facts are a true record of the accident/incident:

Signed:

Date:

Name: MAGGIE NORTH