

Junior Reds FC Incident/Accident Report Form

Name of Team:.....

Site where incident / accident took place:.....

Name of person in charge of session / competition:.....

Name of injured person:.....

Address of injured person:.....

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Post code:.....

Date and time of incident / accident:.....

Nature of incident / accident:.....

Give full details of how and precisely where the incident / accident took place. Describe what activity was taking place (eg, training programme, getting changed):.....

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Incident Guidelines

- (1) Stay calm but act swiftly and observe the situation. Is there danger of further injuries?
- (2) Listen to what the injured person is saying.
- (3) Alert the first-aiders who should take appropriate action for minor injuries.
- (4) **In** the event of an injury regarding specialist treatment, call the emergency services.
- (5) Deal with the rest of the group and ensure that they are adequately supervised.
- (6) Do not move someone with major injuries - wait for the emergency services.
- (7) Contact the injured person's parent/guardian.
- (8) Complete this incident / accident report form.

All of the above are a true and accurate record of the incident / accident

Signed:.....

Date:.....

Name (print):.....

Send completed forms to:
 Mr Clive Chivers.
 103, Old Farm Avenue.
 Sidcup.
 DA15 8AJ.

