



SIDMOUTH & OTTERY HOCKEY CLUB



ACCIDENT/INCIDENT REPORTING FORM

Please ensure that this form is completely legibly and that it is signed and dated.

1. Location where accident/incident took place	
2. Full name of responsible person – coach/captain	
3. Full name of the injured person	
4. Full address of the injured person (if Under 18)	
5. Age of the injured person (if Under 18)	
6. Date of accident/incident	Time of accident/incident
7. Nature of injury/incident	
8. FULL details of the incident including; how it happened; what activity was being performed; training, league game, etc.	
9. Give full details of action taken including any first aid treatment given & the name(s) of the first aider(s):	

10. What happened to the injured person following the accident? (e.g. went home, collected by parent/carer, went to hospital, carried on with session, etc.)			
Police called:	Yes / No	Ambulance called:	Yes / No
Facility manager informed:	Yes / No	Facility accident book completed	Yes / No
Parent informed	Yes / No	Parent Name Informed:	
13. Other actions/relevant information:			

To be completed by supervising coach/captain/club official.

I confirm that the above details are correct and accurate to the best of my knowledge.

Print name:	
Signature:	Date:

Send completed form without delay to cathdockley@btinternet.com (Club Welfare Officer) (scan and email).

Ver 1.0 dated 01 Sep 2016