

# Incident Report Form

Report Date:

Incident Date:

Incident Time:

Location (Field Name/Address):

Individuals Involved:

Witnesses:

Description of Incident:

Action Taken On-Site:

Signature of Reporting Coach/Official: \_\_\_\_\_

Signature of League President/Safety Officer: \_\_\_\_\_

This is a procedural document to be used by all league officials and coaches. A hard copy of the Incident Report Form should be readily available in each team's first aid kit.

