



POOLE HOCKEY CLUB - INCIDENT REPORT FORM

Please ensure that this form is completely legible and is signed and dated.

1. Name and location of facility	
2. Full name of the injured person	
3. Full address of the injured person	
	Contact Phone No:
4. Age of the injured person	
5. Date of accident	Time of accident
6. FULL details of the incident including;- how it happened; what activity was being performed; where it happened;	
7. Nature of injury, including location on body	
8. Nature of any injuries/after-effects which developed later	
9. Witness name(s) and address(es)	
Police called: Yes / No	Ambulance called: Yes / No
Facility manager informed: Yes / No	Facility accident book completed Yes / No
Parent informed Yes / No	
10. Details of first aid given	
11. Other actions?	

Section to be completed by supervising coach/leader

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

Print name:	
Signature:	Date: