



Accident Report Form

Where did accident take place?

Who was responsible for the session or competition?

Name of injured person

Address of injured person

Date and time of accident

Nature of accident

Provide details of how and precisely where the accident happened. Describe what was taking place at the time.

Give full details of any action taken including any treatment and the name of the first-aider(s)

What happened to the injured person? (e.g. went home, carried on playing, hospital attendance)

Witness name (required if serious injury)

Telephone number

Your name

Date

All the above facts are a true and accurate record of the accident. Signed: