**Accident reporting form**

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| In the event of an accident, the following procedure should be followed by the club or team:1. Fill in 2 copies of this form for **all** accidents.
2. Make contact with parents / carers if under 18 years.
3. Add 1 copy of form to club/team incident book / folder.
4. Forward 1 copy to Medway Netball League secretary for record keeping / action required.
5. Contact emergency services / GP if required.
6. Record in detail all facts surrounding the accident, including witnesses, etc.
7. Any further action.
8. Sign off on any action required from the club/team.
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| **Contact information – responsible adult** |
| Name of responsible person in attendance |  |
| Address |  |
| Contact number(s)  |  |
| Email  |  |
| Name of club/team |  |

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| **Injured person information**  |
| Name  |  |
| Address |  |
| Date of birth |  |
| Gender[[1]](#endnote-1) | Female🞎 | Male🞎 | Non-binary🞎 | Another description (please state)🞎 |
| Has the injured person returned to the club/team netball following the accident? | No🞎 | Yes🞎 |  |
| **Accident information** |
| Date of accident |  | Time of accident |  |
| Date reported |  | Time reported |  |
| Who reported the accident? |  |
| Location of accident |  |
| Details of injury |  |
| Nature of and how accident happened |  |
| Did anyone witness the accident? | No🞎 | Yes – please give name(s) and details of witness(es)🞎 |
| Was first aid involved? | No🞎 | Yes – please give details🞎 |
| Have parents / carers been notified if young person? | No🞎 | Yes – please state by whom and when🞎 |
| Recommended action to be taken |  |
| Referred to designated person(s) in club/team? | No🞎 | Yes – please give name(s) and position in club/team🞎 |
| Form completed by (print your name) |  |
| Your signature | 🗶 |

1. [↑](#endnote-ref-1)