



Incident/Accident Report Form

Mini and Junior Section

Knutsford Rugby Club

Site where incident/accident took place	
Name of person in charge of session/competition	
Name of injured person	
Address of injured person	
Date and time of incident/accident	
Nature of incident/accident	
Give details of how and precisely where the incident/accident took place. Describe what activity was taking place, eg training game, getting changed, etc.	
Give full details of the action taken including any first aid treatment and the name(s) of the first aider(s):	
Were any of the following contacted:	Police: Yes • No • Ambulance: Yes • No • Parent/guardian: Yes • No •
What happened to the injured person following the incident/accident? (eg went home, went to hospital, carried on with session)	

All of the above facts are a true and accurate record of the incident/accident.

Signed

Date

Print Name:

