The FA Charter Standard Club Programme Incident/Accident Reporting Form





| In | Football Club cident/Accident Reporting Form | 8. Give details of the action taken including any first aid treatment and the name(s) of the first-aider(s). | d |
|----|--|---|------|
| 1. | Site where accident took place | | |
| 2. | Name of person in charge of session/competition | | |
| 3. | Name of injured person | 9. Were any of the following contaced Police Yes No Parent/Guardian Yes No | |
| 4. | Address of injured person | 10. What happened to the injured person after the accide (eg. went home, went to hospital, carried on with sess | |
| 5. | Date and time of incident/accident | 11. All of the above facts are a true and accurate record the incident/accident. | l of |
| 6. | Nature of accident/incident | Signed Name (Print) Date | |
| 7. | Give details of how and precisely where the accident took place. Describe what activity was taking place, eg. training programme, getting changed, etc. | | |