



# DIDCOT TOWN YOUTH FOOTBALL CLUB ACCIDENT REPORT FORM

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Name of player	
Private address	
Name of manager	
Date of accident	
Where accident occurred	
Witnesses to the accident <i>(All names and contact details required)</i>	
Details of accident	
How accident was caused	
Actions taken <i>(Committee response)</i>	
Latest information <i>(Committee response)</i>	

Signed *(Person reporting incident)*

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Signed *(Welfare Officer)*

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**Accidents should be reported to the Welfare officer &  
committee without delay**

Email report forms to [DTYFC.welfare@outlook.com](mailto:DTYFC.welfare@outlook.com)