



Waveney Youth F.C. 2007 F.A. National  
Charter Standard Community Club of the Year

### Accident / Incident Report Form

If at any time during your training session or during a match or other activity an accident or other incident takes place, please follow the guidelines below and record details overleaf.

- Stay calm but act swiftly and observe the situation, is there any danger of further injuries?
- Listen to what the injured person is saying?
- Alert the first aider, who should take appropriate action for minor injuries.
- In the event of an injury regarding specialist treatment, call the emergency services.
- Deal with the rest of the group, and ensure they are adequately supervised.
- Do **NOT** move someone with major injuries, wait for the paramedics.
- Contact the injured persons parent / guardian

#### Who was involved in the accident / incident

Name of injured person?	
Address of injured person?	
Date of Birth?	
Parent / Guardian details?	
Details of any specific medical needs / treatment?	
Allergies i.e. allergic to penicillin?	

#### The Accident / incident

Date & Time of Incident?	
Where did the incident occur?	
Give details of how and precisely where the accident / incident took place. Describe what activity was taking place i.e. training, match, getting changed etc.?	

#### The Person in Charge

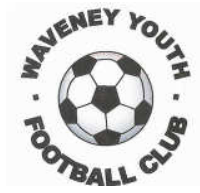
Name Of Person In Charge?	
Name of Person dealing with the accident / incident?	
Are they a qualified first-aider?	
Date they attended most recent F.A. Child Protection workshop?	
Date they attended most recent F.A. Emergency aid course?	
CRB Certificate Number / date?	



**COMMUNITY CLUB**  
**CHARTER STANDARD CLUBS**



Club Welfare – Accident / Incident Report Form  
January 2008



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**Action Taken**

Give details of any action taken?	
Were any of the emergency services contacted?	
What happened to the injured person i.e. went home, went to hospital, carried on?	
Was a parent /guardian present?	

**Additional Notes**

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Please forward this e-mail to the Club Welfare Officer as soon as possible.

**Declaration**

The above record is a true and accurate account / record of the accident / incident

Signed.....

Name (print).....Date.....

*Please note this form may be disclosed for the purpose of civil proceedings*



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