



## Accident Reporting Form

In the event of an accident, the following procedure should be followed:

- Fill in the Accident reporting form for ALL accidents.
- Make contact with parents/guardians.
- Forward the form to Vanessa Russell in the SCB Office for record keeping/action required - [vanessa.russell@cricketshropshire.co.uk](mailto:vanessa.russell@cricketshropshire.co.uk)
- Contact emergency services/GP if required.
- Record in detail all facts surrounding the accident, witness's etc.
- Sign off on any action required from senior management officer.

Coach/es in attendance:	
Address Head Coach:	
Day time/ evening Tel No:	
Email address:	

Injured person information:	
Name of injured child/young person:	
Address:	
Date of birth: Age:	
Gender:	Male / Female

Accident information: (To be recorded by organisation/club and shared with relevant staff and parents/carers)			
Date of accident:		Time of accident:	

Date reported:		Time reported:	
Accident reported by who:			
Location of accident:			
Details of injury:			
Nature and how accident happened:			
Did anyone witness the accident:	Yes / No (If Yes, state witness name/s and details below)		
Name of witnesses:			
First aid involved: (please provide details)			
Parents/carers notified:	Yes / No (If Yes, by whom and when below)		
Parents/carers notified by whom and when:			
Recommended action to be taken:			
GP/Emergency services contacted:	Yes / No (If Yes, record details below)		
Details:			

Form completed by:	
Signature:	

Signature of management representative:	
Print name:	
Role within organisation:	
Date:	