

LEBANON WARRIOR YOUTH FOOTBALL LEAGUE

Accident Reporting

Accident Report form is below with a downloadable version available on our website- www.lebanonwarriorfootball.com

The LWYFL requires that all serious accidents/injury which occur during of your coaching sessions are recorded on the form below and delivered to the LWYFL Board within 24 hours of the accident. This includes accidents involving parents, coaches or other adults. The accident forms are kept for future reference.

There are a number of reasons for this:

- 1 Details of the accident which occurred are accurately recorded at the time of the accident taking place
- 2 Details are readily available if any comeback arises due to the accident taking place
- 3 It is an example of good practice to keep accurate records of any accidents which occur in any sessions that you coach

Accident Report Form

Please note: These details should be relayed to the LWYFL Board within 24 hours.

Injured Party								
Full Name								
Address								
Phone Numbers						Age if under	16	
Team Grade and Color								
Head Coach								
Activity At time of the accident								
Person reporting the accident (if different from a			n above)					
Full Name								
Address								
Phone Numbers					Age if unc	ler 16		
Position w/ LWYFL (i.e. coach, parent, assistant coach, team mom, etc.)								
Other Adult Witnesses								
Signature				Date				



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Date of Accide	ent				Time	AM/PM					
Location of Ad	ccident										
Description of accident (including activity, equipment involved, place and cause)											
Body Part inju	ıred:										
Possible type of injury (sprain, laceration, bruise, dislocation, fracture, concussion, etc):											
Initial First Aid (Ice applied, cut cleaned, etc.)											
What happened to the injured person following the accident? (I.e. carried on with session, went											
home, transported to hospital via ambulance, transported to hospital via parents, etc.)											
		ny of the following contacted?	Yes	No							
		s/Guardians									
	lf '	yes, were the parents/guardians contacted later that day/night?									
	Police										
	Ambula	ance									
Additional Info	ormation	/Comments:									
All of the above	All of the above facts are a true record of the accident/incident.										
Signature					Date						