

CLUB SPORTS – ACCIDENT/INCIDENT REPORT

GENERAL INFORMATION					
Name of Injured		AU ID			
Date of Accident		Time of Accident			
Address or Mailstop of Injured					
Phone of Injured		Email of Injured			
Date of Birth		CLUB			

LOCATION INFORMATION					
Name of Location		Reason for being there?			
Physical Address of Accident Location					

Use the space below to describe:

- 1. Events leading to the accident/incident.
- **2. Extent of injuries.** *e.g.* approximately one inch cut on left knee.
- **3.** Care Provided (if applicable)
- 4. Outcome of the accident.

Name of Person Completing Form						