

## **AYSO INCIDENT REPORT FORM**

**Coaches:** Complete and return the form to the Regional Commissioner, Area Director, Safety Director or Tournament Director.

Region, Area or Tournament Staff ONLY: Forward copy of completed form to AYSO, Attn: Risk Mgmt, 19750 S Vermont Ave, Suite 200, Torrance, CA 90502

Complete this form for:

1. Injuries

2. Incident – threats
3. Incident – fighting – any type
4. Property damage

5. Law enforcement summoned

AFFECTED PARTY:	□ Player □ Offici	al 🗆 Coad	ch Spectator	□ Volunte	eer 🗆 (	Other SectionA	rea	Region				
Last Name			First Name							Male	Female	
									Birth o	date:	•	
Address:									AYSO	# טו		
City.		c	tata.	7in.		Talanhana. /	`					
City:			tate:	Zip:		Telephone: (	)					
Contact email(s):  No If yes, please provide name of company and policy												
Does the injured r	person have other r	nedical insi	urance?	Yes		#:	nae nar	ne of company	ana policy			
Employer Name 8												
	NT (if affected part	tv is a mind	or):									
Last Name	(.),		irst Name			MI		Т	elephone N	Number: (	)	
Addition.												
Address:				City:				_	State: Zip:			
INCIDENT	Date of Incident:			Age Division		n:	☐ Boy	rs 🗆 Girls	Time of Ir	ncident:	AM	
INFO:											/	
											PM	
Tournament Nam	e & Location (if app	licable)				_						
Team Involved #1:					Coach Name:						Region #	
Team Involved #2	:					Coach Name:					Region #	
	BODY PART INJURED				If	ankle injury, was ank	le:	PRIMARY INJURY				
☐ Ankle (L/R)		houlder(L/	R) 🗆 To	oth		ped/Supported		☐ Abrasion	☐ Disl	location	☐ Pain	
☐ Knee (L/R)		Vrist (L/R)	□ Ba			nsupported es: □ Yes □ No		□ Burn		eign Body	☐ Seizures	
□ Leg □ Foot	☐ Finger ☐ 500					ee injury, was knee:	☐ Cardiac		☐ Fra	cture	☐ Sting/Bite	
☐ Toe	□ Far (L/R) □ Int					aced/Supported		□ Cold Injury		at Exhaustion	☐ Strain	
□ Arm	□ Nose			injury	IJURY   D Unsupported			☐ Concussion		eration	☐ Sprain	
☐ Hand	□н	lead	□ Ot	ner	Knee	Pads: ☐ Yes ☐ No		☐ Contusion	□ Nau	usea		
LOCATION					INCIDENT				DISPOSITION			
			on (participant/spectator)		☐ Animal/insect bite/stin☐ Slip/Fall		ing	No care gi	No care given: ☐ Not Needed☐ Patient Refu			
	ng Competition/Event ☐ Collision (with o r Competition/Event ☐ Collision (partici			participant/participant)		☐ Overexertion		Released:		☐ To Parent	useu	
☐ Competition Ar	· · · · · · · · · · · · · · · · · · ·					Assault/Sexual		nereuseu.	To Personal Vehicle		Vehicle	
☐ Concession Are			by falling /flying object			☐ Assault/Non-Sexual		Referral		☐ To Doctor	· ce.e	
☐ Parking Lot						Property Damage				☐ To Hospital	/Clinic	
☐ Restrooms	ooms							,		☐ Region Reco	ommended	
☐ Off Property	4.									☐ Patient/Par	ent Requested	
☐ Bleachers/Stan	□ Dirt □ Grass				Г	☐ Non-Injury (threat,						
FIELD SURFACE	☐ Turf ☐ Indoor		CLASSIFICATIO	N		assault)		☐ Minor Injury	or Illness	☐ Serious I	njury or Illness	
POLICE REPORT F	ILED: ☐ Yes ☐ No	If yes, re	port number:			Officer's Name	e& bad	ge # :				
Describe how the Misconduct Report		property d	lamage occurred	: (use the b	ackside	e or attach a separate :	sheet if	necessary – mo	ıy attach a	copy of the Ref	eree Game	
			14	VITNIESS INT	EODA4A	TION Confidential						
	Name	VIIIVESS IIN	NESS INFORMATION - Confidential Address						ele Number			
Person/volunteer completing/submitting this form:												
Name:	iture:				Ph: ( )							
					Cell:							
Position Title:				e-mai	e-mail address:						:	
Regional Commissioner: print name				Signat	Signature:						:	

## **AYSO Incident Report Form - Instructions**

NOTE: This form should NOT be completed by a parent unless the parent is the coach.

## Purpose:

The AYSO Incident Report Form is used whenever there is a personal injury, damaged property, or threats of or actual physical violence surrounding an AYSO game, practice, event or property. The form should be prepared by the coach, AYSO Official, or AYSO Volunteer which may be a member of the regional staff such as the regional safety director, or by tournament or event staff members.

## **Entry Instructions:**

Form Preparation	The regional safety director should supply each coach with several copies of the form at the beginning of each season. Additional copies should be available at each field site. Coaches who take teams to tournaments should carry several copies of each form throughout the tournament season.							
	If there is an incident involving injury to a player or volunteer which will result in the filing of a SAI claim, then an Incident Report Form should be completed as well.							
	If there are multiple affected parties to the same incident, then all parties should fill out their own form.							
	Note: The Region, Area or Tournament is responsible for mailing a copy of the Incident Report to AYSO, Attn: Risk Management, 19750 S Vermont Ave, Suite 200, Torrance, CA 90502.							
Form Entries	Fill out all entries on the form that pertain to the incident.							
Witness Information	When an incident occurs, it is important to gather as much witness information as possible, especially if the witness is independent or neutral. Use a separate page to collect each witness's statement. In addition to gathering the name, address and phone number of all witnesses, gather and attach as many written statements as possible from the key witness. If the incident happened during a game, attach the referee's Game Misconduct Report as well.							
Description of Incident	Provide as full a description as you can of the events surrounding the incident, attaching additional pages if necessary (be sure that all additional pages are numbered and securely attached to the report.)							
Routing	During an event or activity related to a region's primary season, the completed form should be submitted to the respective Regional Commissioner or Safety Director.							
	During a secondary activity (e.g. a tournament), the form should be submitted to the Regional Commissioner, secondary activity's director, or Regional Safety Director.							
	At a tournament, the tournament staff may prepare a report as well. In this case, a copy of the report should immediately be sent to the respective Regional Commissioner(s).							
	In all cases, copies of the Incident Report should always be sent to the Regional Commissioner, Area Director, Safety Director, and in the case of a secondary event the Secondary Event Director.							
	Note: A copy of the Incident Report must be sent to the AYSO, Attn: Risk Management, 19750 S Vermont Ave, Suite 200, Torrance, CA 90502.							
Retention	Incident forms should be maintained in a regional file and stored for a minimum of <u>15 years</u> . In the case of a secondary event which is sponsored at the area or section level, the secondary event host should retain the original copy for a minimum of <u>15 years</u> .							
	Secondary events must also send copies of the Incident Reports to AYSO, Attn: Risk Management for storage.							