AYSO INCIDENT REPORT FORM

Complete this form for any of the following: *(check type)*

☐ Injury/illness ☐ Threats ☐ Fights ☐ Property damage ☐ Calls to Police ☒ Other

*Return **completed** form to the Regional Commissioner, Safety Director, Area Director, or Tournament Director.*

AFFECTED PARTY: ☐ **Player** ☐ **Official** ☐ **Coach** ☐ **Spectator** ☐ **Volunteer** ☒ **Other**	**AYSO ID #** ***(Required)***	**Region #** ***(Required)***

Last Name	**First Name**	**MI**	**Birth date:**
		E	**Phone:**

Address:	**City:**	**State:**	**Zip:**

Does the injured person have medical insurance? **YES** ☐ **NO** ☐	***If yes, please provide name of company and policy #:***

GUARDIAN/PARENT (*if affected party is a minor*):

Last Name	**First Name**	**Address** *(if different than above):*

Email 1:	**Cell Ph:**
Email 2:	**Cell Ph:**
Email 3:	**Cell Ph:**

INCIDENT INFO:	***Date of Incident:***	***Age Division:***	☐ ***Boys*** ☐ ***Girls*** ☐ ***Co-ed***	***Time of Incident:*** PM

Location *(if applicable-Tournament name):*

Team Involved #1:	*Coach Name:*	*Region #*
Team Involved #2:	*Coach Name:*	*Region #*

FOR INJURIES: BODY PART INJURED			**TYPE OF INJURY/ILLNESS**			**FIELD SURFACE**	**LOCATION**
☐ Ankle (L/R)	☐ Shoulder(L/R)	☐ Tooth	☐ Abrasion	☐ Dislocation	☐ Pain	☐ Dirt	☐ Before Competition/Event
☐ Knee (L/R)	☐ Wrist (L/R)	☐ Back	☐ Burn	☐ Foreign Body	☐ Seizures	☐ Grass	☐ During Competition/Event
☐ Leg	☐ Finger	☐ Neck	☐ Cardiac	☐ Fracture	☐ Sting/Bite	☐ Turf	☐ After Competition/Event
☐ Foot	☐ Eye (L/R)	☐ Internal	☐ Cold Injury	☐ Heat Exhaustion	☐ Strain	☐ Indoor	☐ Concession Area
☐ Toe	☐ Ear (L/R)	☐ No injury	☐ Concussion	☐ Laceration	☐ Sprain		☐ Parking Lot
☐ Arm	☐ Nose	☐ Other	☐ Contusion	☐ Nausea	☐ COVID-19		☐ Restrooms
☐ Hand	☐ Head						

CAUSE	**OUTCOME**		**POLICE REPORT FILED:**
☐ Collision (participant/spectator)	*No care given:*	*Referral:*	☐ **Yes** ☒ **No** ***Report No:***
☐ Struck by falling/flying object	☐ Not Needed	☐ To Doctor	***Officer's Name & Contact No:***
☐ Struck by or fell into goal	☐ Patient Refused	☐ To Hospital/Clinic	
☐ Animal/insect bite/sting			
☐ Slip/Fall	*Released:*	*EMS transport:*	
☐ Assault/Sexual	☐ To Parent	☐ Region Recommended	
☐ Assault/Non-Sexual	☐ To Personal Vehicle	☐ Patient/Parent Requested	
☐ Property Damage			

Describe how the incident, injury or property damage occurred:
(*use the backside or attach a separate sheet if necessary – may attach a copy of the Referee Game Misconduct Report*)

WITNESS INFORMATION – Confidential

Name	**Address**	**Phone Number**

Person/volunteer completing/submitting this form:

Name:	**Signature:**	**Cell:**
Position Title:	**E-mail address:**	**Date:**
RC or Safety Director (print name)**:**	**Signature:**	**Date:**

***AYSO Staff ONLY:** Email completed form to riskmanagement@ayso.org. Questions? Email or call 800-872-2976.*

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 or illness, damaged property, or threats and/or actual physical violence surrounding an AYSO event (game, practice), property damage, or calls to the police. 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 Region should provide coaches with several copies of the form at the beginning of each season. Additional copies can be downloaded from **https://www.aysovolunteers.org/incident-report-form/** Coaches who take teams to tournaments should carry several copies of each form throughout the tournament season. An Incident Report should be completed for any incident involving injury to a player or volunteer. 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 emailing a copy of the Incident Report to AYSO at riskmanagement@ayso.org. Questions? Email or call 800-872-2976.***
Form Entries	Fill out the form completely and include all details pertaining to the injury/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 at riskmanagement@ayso.org. If you have questions, send an email or 800-872-2976.***
Retention	Incident forms should be maintained in a regional file and stored for a minimum of 15 years. 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 15 years. Secondary events must also send copies of the Incident Reports to **AYSO, Attn: Risk Management the email listed above for storage.**