



AMERICAN YOUTH SOCCER ORGANIZATION INCIDENT REPORT

S/A/R: _____

Complete this report for any of the following (Check type)

☐ Injury/illness ☐ Theft ☐ Property Damage ☐ Weather Event ☐ Disruptive behavior ☐ Referee Abuse ☐ Fighting ☐ Other Abuse ☐ Threats ☐ Police involved incident ☐ Other

Parties Involved

	Legal Name (Last, First, MI)	Phone Number	Email Address	Injured (Y or N)	AYSO ID #	Date of Birth	AYSO Role
1							
2							
3							
4							

Date of incident: _____ Age Division _____ ☐ Boys ☐ Girls ☐ Coed Time of incident: _____ AM/PM Field Location: _____

Team involved: _____ Coach name _____ Region # _____

Team involved: _____ Coach name _____ Region # _____

Referees: _____

SAI form or link given to injured person: ☒ Yes ☐ No

Incident occurred ☐ Before Competition/Event ☐ After Competition/Event ☐ During Competition/Event ☐ In restroom ☐ In parking lot ☐ In concession area ☐ Other _____

Police Report Filed: ☒ Yes ☐ No Report No: _____ Officer's Name & Contact No: _____



Injured party see QR code for insurance

Incident Information

Describe the incident in detail including attaching any maps, pictures, witness statements, etc. (Use additional paper or attach information as needed)

Injury Information

FOR INJURIES: BODY PART INJURED	Cause	TYPE OF INJURY/ILLNESS
☐ Ankle (L/R) ☐ Shoulder(L/R) ☐ Tooth	☐ Collision (participant/spectator) ☐ Slip / Fall	☐ Abrasion ☐ Dislocation ☐ Pain
☐ Knee (L/R) ☐ Wrist (L/R) ☐ Back	☐ Struck by falling/flying object ☐ Assault/Sexual	☐ Burn ☐ Foreign Body ☐ Seizures
☐ Leg (L/R) ☐ Finger ☐ Neck	☐ Struck by or fell into goal ☐ Assault/Non-Sexual	☐ Cardiac ☐ Fracture ☐ Sting/Bite
☐ Foot (L/R) ☐ Eye (L/R) ☐ Internal	☐ Animal/insect bite/sting ☐ Property Damage	☐ Cold Injury ☐ Heat Exhaustion ☐ Strain
☐ Toe ☐ Ear (L/R) ☐ No injury		☐ Concussion ☐ Laceration ☐ Sprain
☐ Arm (L/R) ☐ Nose ☐ Other		☐ Contusion ☐ Nausea ☐ Covid 19
☐ Hand (L/R) ☐ Head		
	Field Surface	OUTCOME
	☐ Dirt	No care given:
	☐ Grass	☐ Not Needed
	☐ Turf	☐ Patient Refused
	☐ Indoor	Released To:
		☐ Parent
		☐ Personal Vehicle
		Referral To:
		☐ Doctor
		☐ Hospital/Clinic
		EMS transport:
		☐ Region Recommended
		☐ Patient/Parent Requested

Witness Information

Name	Address	Email Address	Phone Number

Name of person completing report:	Signature:	Cell Phone:
Position:	Email:	Date:
Safety Director or RC Name:	Signature:	Date:

Reports sent to ☐ RiskManagement@ayso.org

** Private for AYSO internal use only. Report to be completed by AYSO registered and certified volunteers only **

AYSO Incident Report – Instructions

NOTE: This report should only be completed by an AYSO registered and certified volunteer.

Purpose:

The AYSO Incident Report is used whenever there is a personal injury or illness, damaged property, or threats and/or actual physical violence, weather event, referee abuse, or calls to the police surrounding an AYSO event (game, practice). The report should be completed by an AYSO registered and certified volunteer.

Entry Instructions:

Report Preparation	The Region should provide coaches with several copies of the report at the beginning of each season. Additional copies can be downloaded from https://wiki.ayso.org/wiki/Fill_Out_an_Incident_Report Coaches who take teams to tournaments should carry several copies of the incident report throughout the tournament season. An Incident Report should be completed for any player or volunteer for any of the following: personal injury or illness, damaged property, or threats and/or actual physical violence, weather event, referee abuse, or calls to the police (check all that apply). If referee abuse is being reported, please attach the Referee's Game Misconduct / Match Report to the incident report. If there are multiple affected parties to the same incident, then all parties should fill out their own incident report.
Report Entries	Fill out the report completely and include all details pertaining to personal injury or illness, damaged property, or threats and/or actual physical violence, weather event, referee abuse, or calls to the police. In the event of an injury, SAI form MUST BE PROVIDED to the injured party. (https://wiki.ayso.org/wiki/Soccer_Accident_Insurance)
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. Please use the Witness form to collect each witness's statement. Please use the following link or the QR to the left. (https://wiki.ayso.org/w/images/Witness_Statement_-_fillable.pdf) 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 / Match Report as well.
Description of Incident	Provide a detailed description 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	The completed report must be submitted to the Regional Commissioner or Section / Area / Regional Safety Director. During a secondary activity (e.g. a tournament), the report should be submitted to the Regional Commissioner, secondary activity's director, or Section / Area / Regional Regional Safety Director. In all cases, copies of the Incident Report should always be sent to the Regional Commissioner, Area Director, Section Director, Section / Area / Regional Safety Director, and in the case of a secondary event the Secondary Event Director. Note: The Region, Area or Section are responsible for emailing a copy of the Incident Report to AYSO at riskmanagement@ayso.org. If you have questions, send an email to riskmanagement@ayso.org or call 800-872-2976.
Retention	Incident reports 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 the email listed above for storage.



Injured party see QR code for insurance