Humber Junior
Squash Academy

HUMBER JUNIOR SQUASH ACADEMY - INCIDENT/ACCIDENT REPORT FORM

1. Site where incident/accident took place: .....

2. Name of person in charge of session/competition: .....

3. Name & Address of injured person: .....

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4. Date and time of incident/accident: .....

5. Nature of incident/accident: .....

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6. Give details of how and precisely where the incident/accident took place. Describe what activity was taking place, e.g. training game, getting changed, etc.

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7. Give full details of the action taken including any first aid treatment and the name(s) of the first aider(s):

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8. Were any of the following contacted:

Police: Yes ☐ No ☐
Ambulance: Yes ☐ No ☐
Parent/guardian: Yes ☐ No ☐

9. What happened to the injured person following the incident/accident? (e.g. went home, went to hospital, carried on with session)

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10. All of the above facts are a true and accurate record of the incident/accident.

SIGNED: ..... DATE: .....

Name: .....