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** ☐ **Official** ☐ **Coach** ☐ **Spectator** ☐ **Volunteer** ☐ **Other** **Section_____ Area ____ Region_____**

Last Name	First Name	MI	☐ Male ☐ Female
			Birth date:
Address:			**AYSO ID #**

City: d State: Zip: Telephone: ( )

Contact email(s):

Does the injured person have other medical insurance? ☐ Yes ☐ No ***If yes, please provide name of company and policy #:_____***

Employer Name & Address:

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

Last Name First Name MI Telephone Number: **( )**

Address: City: d State: Zip:

INCIDENT INFO:	Date of Incident:	Age Division:	☐ Boys ☐ Girls	Time of Incident: ☐ AM / ☐ PM

Tournament Name & Location *(if applicable)*

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

BODY PART INJURED			***If ankle injury, was ankle:***	**PRIMARY INJURY**		
☐ Ankle (L/R)	☐ Shoulder(L/R)	☐ Tooth	☐ Taped/Supported	☐ Abrasion	☐ Dislocation	☐ Pain
☐ Knee (L/R)	☐ Wrist (L/R)	☐ Back	☐ Unsupported	☐ Burn	☐ Foreign Body	☐ Seizures
☐ Leg	☐ Finger	☐ Neck	Shoes: ☐ Yes ☐ No	☐ Cardiac	☐ Fracture	☐ Sting/Bite
☐ Foot	☐ Eye (L/R)	☐ Internal	***If knee injury, was knee***:	☐ Cold Injury	☐ Heat Exhaustion	☐ Strain
☐ Toe	☐ Ear (L/R)	☐ No injury	☐ Braced/Supported	☐ Concussion	☐ Laceration	☐ Sprain
☐ Arm	☐ Nose	☐ Other	☐ Unsupported	☐ Contusion	☐ Nausea	
☐ Hand	☐ Head		Knee Pads: ☐ Yes ☐ No			

LOCATION	**INCIDENT**		**DISPOSITION**	
☐ Before Competition/Event	☐ Collision (participant/spectator)	☐ Animal/insect bite/sting	*No care given:*	☐ Not Needed
☐ During Competition/Event	☐ Collision (with object)	☐ Slip/Fall		☐ Patient Refused
☐ After Competition/Event	☐ Collision (participant/participant)	☐ Overexertion	*Released:*	☐ To Parent
☐ Competition Area	☐ Collision (spectator/spectator)	☐ Assault/Sexual		☐ To Personal Vehicle
☐ Concession Area	☐ Struck by falling /flying object	☐ Assault/Non-Sexual	*Referral*	☐ To Doctor
☐ Parking Lot	☐ Caught in, on, between goal	☐ Property Damage		☐ To Hospital/Clinic
☐ Restrooms			*EMS transport::*	☐ Region Recommended
☐ Off Property				☐ Patient/Parent Requested
☐ Bleachers/Stands				

FIELD SURFACE ☐ Dirt ☐ Grass ☐ Turf ☐ Indoor

CLASSIFICATION ☐ Non-Injury *(threat, assault)* ☐ Minor Injury or Illness ☐ Serious Injury or Illness

POLICE REPORT FILED: ☐ Yes ☐ No ***If yes, report number:*** ***Officer's Name& badge # :***

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**	**Tele Number**

Person/volunteer completing/submitting this form:

Name:	Signature:	Ph: ( ) Cell: ( )
Position Title:	e-mail address:	Date:
Regional Commissioner: *print name*	Signature:	Date:

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 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 for storage.**