

Farnham Rugby Union Football Club

Wilkinson Way, Monkton Lane, Farnham, Surrey, GU9 9ND

‘Reportable Injury’ Report Form

In the event of any player sustaining a possible ‘**reportable injury**’ on or off the field, please complete the following information within 24 hours of the incident and return to your team representative.

Name of player			
Age			
Address			
Telephone			
Accident details ✓ as appropriate	Match	Training	Travel
Date and time of incident			
Ground and weather conditions			
Type of injury sustained			
Location of injury on body			
Medical services attended ✓ as appropriate	Yes	No	
Ambulance attended ✓ as appropriate	Yes	No	
Hospital			
Parents contacted ✓ as appropriate	Yes	No	
Estimated number of weeks away from rugby activity			
Brief incident report & comments + witness names	Please complete on back of sheet / or attach on separate sheet		
Coach's signature			

