

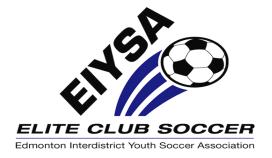
#307, 8925 - 51 Avenue Edmonton AB, T6E 5J3

NOTE: This report template is for the use of EIYSA Members (Team Officials, Players and Parents). If you are unsure what qualifies as an incident please contact the EIYSA Office. For injuries/accidents arising from games or practices please refer to 'Injury Form' and 'ASA Insurance' on the EIYSA website.

INCIDENT REPORT (PRINT ALL INFORMATION)

Please complete this report to the best of your ability with the information you have available to you. If there are sections which are not applicable in this situation, or which you do not know, please indicate so or leave blank.

Type of Incident (physical/verba	l assault, recruitm	nent, etc.):		
Date of Incident:_	Ven	ue/Location:			
Age Group:	Division:	Team Affilia	tion:		
Type of Event (i.e.	league game, to	ournament, etc.):_			
Individual/s Invo	lved in Incident	t: (circle): Player	Team official Spectator	Referee Other:	
Individual/s Nam	e/s:				
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Name of person submitting this report	Email	/
Signature of person submitting this report	Phone Number	/
Date	Alternate Phone Number	
Club Affiliation		