



## **Kings West Soccer Club Incident Report Form**

Purpose: This form is intended to document any incidents that occur during club activities, including practices, matches, tournaments, or other events. This ensures that the club can address concerns and take appropriate actions to maintain a safe and positive environment for all members.

Thank you for your time and information.

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### **Reporting Party Information**

Name: \_\_\_\_\_

Role:

- ☐ Player
- ☐ Parent/Guardian
- ☐ Coach
- ☐ Other: \_\_\_\_\_

Team Name/Age Group: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **Incident Details**

Date of Incident: \_\_\_\_\_

Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Type of Incident: \_\_\_\_\_

- ☐ Injury
- ☐ Verbal Altercation
- ☐ Physical Altercation
- ☐ Rule Violation
- ☐ Misconduct
- ☐ Discrimination/Harassment
- ☐ Other: \_\_\_\_\_

## Involved Parties

Name(s) of Involved Party(ies):

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

Role(s):

- ☐ Player
- ☐ Coach
- ☐ Referee
- ☐ Parent/Guardian
- ☐ Spectator
- ☐ Other: \_\_\_\_\_

## Witnesses

Name(s) of Witness(es):

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

Contact Information (if available):

- ☐ \_\_\_\_\_

## Description of Incident

Detailed Description of Incident:

- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

Actions Taken (if any, we do not encourage confrontation/intervention unless necessary):

- \_\_\_\_\_
- \_\_\_\_\_

### **Additional Information**

Has this incident been reported to any other authority?

- Yes
- No
- If yes, to whom? \_\_\_\_\_

Is there any supporting documentation or evidence (photos, videos, etc.)?

- Yes
- No
- If yes, please describe and attach if possible:
  - \_\_\_\_\_
  - \_\_\_\_\_

### **Desired Outcome**

What resolution or action are you seeking?

- \_\_\_\_\_
- \_\_\_\_\_

### **Signature**

Signature of Reporting Party: \_\_\_\_\_

Date: \_\_\_\_\_

We will likely contact you directly upon submission of this form.

\_\_\_\_\_

**Please make the subject of your email “Kings West Incident Report” and submit to:**

Club President: Alanna Chiasson

Email Address: [gachiasson13@gmail.com](mailto:gachiasson13@gmail.com)

**AND/OR**

Club Vice President: Stephen McNeil

Email Address: [smcn1414@gmail.com](mailto:smcn1414@gmail.com)

**Thank you for your report. The club is committed to addressing all incidents fairly and promptly to ensure the safety and well-being of all its members.**

**For Club Use Only:**

**Date Received:** \_\_\_\_\_

**Received By:** \_\_\_\_\_

**Follow-up Actions Taken:**

- \_\_\_\_\_
- \_\_\_\_\_

**Date of Resolution:** \_\_\_\_\_

\_\_\_\_\_