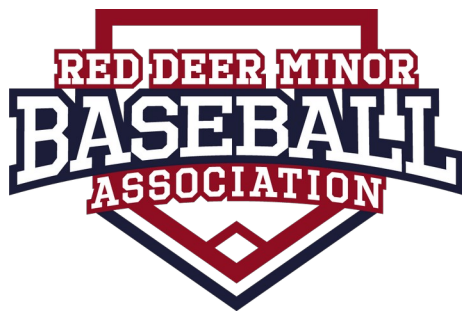




Red Deer Minor Baseball Incident/Injury Tracking Report

Date: _____ Team: _____

Injured Persons Name: _____ DOB: _____

Address: _____

Phone# _____ Alt Phone# _____

Parents Name: _____ Phone: _____

Address (if different from Above) _____

Incident Details:

Incident Time: _____ Coach _____

Field: _____

Incident Occurred:

A) On Primary Playing Field

B) Adjacent to Playing Field

C) Off Ball Field

Other: _____

Incident Occurred while participating in:

Challenger Rally Cap T-Ball Rally Cap 9U

11U A 11U AA

13U A 13U AA 13U AAA

15U A 15U AA 15U AAA

18U A 18U AA 18U AAA

Incident occurred During:

Tryout Practice Game Tournament Provincials

Other (Describe): _____

Batter	Base runner	Pitcher	Catcher	First Base	Second	Third
Short Stop	Left Field	Center Field	Right Field	Dugout	Umpire	Coach
Manager	Spectator	Volunteer	Other: _____			

Yes No

If Yes, What: _____

Yes No

If Yes, What: _____

Yes No

Ambulance Car (by Whom?)_____

[illegible]

Prepared By/Position: _____

Phone #: _____

Please email completed report to info@reddeerminorbaseball.com