



## Accident and Injury report

Name of Child \_\_\_\_\_

Date of incident \_\_\_\_\_

Details of Accident or Injury \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Treatment received \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

First Aid given \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Hospital Treatment Received Yes/No if yes please state which Hospital \_\_\_\_\_

Parents Notified Yes/No

Name of Parent/Guardian \_\_\_\_\_

Name of person reporting incident \_\_\_\_\_

Reported to \_\_\_\_\_

Coach's signature \_\_\_\_\_

Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

It is recommended that following any type of head injury Hospital treatment is sought and all players receive a medical revue with their GP prior to resuming playing or training with Naomh Eanna.

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