

# BCSSA Incident Report Form

**This form is to be used to report all incidents or near misses, and to document the investigation into the incident by the Coach of the person(s) involved &/or a Club Executive Member.**

**Please complete this form within 24hours. The completed form must be emailed to the Regional Director and BCSSA Provincial Office within five (5) business days.**

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

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

Specific Location: \_\_\_\_\_

Name of Individual(s) Involved: \_\_\_\_\_

Date of Birth of Individual(s) involved if minor(s) (under 19years): \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Position: \_\_\_\_\_ Club Name: \_\_\_\_\_

Witness(es) Name(s) \_\_\_\_\_

Witness(es) Name(s) \_\_\_\_\_

Witness Phone Number(s): \_\_\_\_\_

Witness Phone Number(s): \_\_\_\_\_

Incident Description (Reporter):

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Incident Description (Witness account, if available): *Make note if separate statements are attached.*

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Corrective Action Taken:

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Signature of Reporter: \_\_\_\_\_

Signature of Witness(es): \_\_\_\_\_

Signature of Witness(es): \_\_\_\_\_

**Note this is a two 2 page form. Both pages must be completed in full.**

***The following section must be completed by the Club President (or alternate) upon investigation.***

**Probable cause or causes of Incident or near miss:**

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**Prevention of Incident or near miss recurrence**

Describe what action is planned or has been taken to prevent a recurrence of the incident, based on the key contributing factors:

Immediate action: .....

Long term action:.....

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**AUTHORIZATION (ALL SIGNATURES ARE REQUIRED)**

<p><b>Person involved in the incident</b> (Parent or Guardian if child is a minor)</p> <p>Name <i>(please print)</i>: .....</p> <p>Signature: .....</p> <p>Date: .....</p>	<p><b>Witness:</b></p> <p>Name (please print):.....</p> <p>Signature:.....</p> <p>Date:.....</p>
<p><b>Witness:</b></p> <p>Name (please print):.....</p> <p>Signature:.....</p> <p>Date:.....</p>	<p><b>Club President:</b></p> <p>Name (please print):</p> <p>.....</p> <p>Signature:.....</p> <p>Date:.....</p>

<b>OFFICE USE ONLY</b>		
Received:	Review date:	Follow up:

**Note this is a two 2 page form. Both pages must be completed in full.**