# Mount Seymour Little League Incident/Injury Report

Date: _____ Time: _____ Location: _____

Name of Injured Person_____ Date of Birth: _____

Name of Parent/Guardian (if under 18): _____ Informed of Injury? <u>YES/NO</u>

Address of Injured Person_____

Phone Number: _____ Email: _____

Division: _____ Team Name: _____ Coach: _____

Check all applicable responses in each column:

| **Who** | **Where** | **Other Volunteer Activities** |
|---|---|---|
| ☐ Player | ☐ Practice | ☐ Concession |
| ☐ Coach | ☐ Game | ☐ Field Prep |
| ☐ Umpire | ☐ Grandstand/Common Area | ☐ Other: _____ |
| ☐ Volunteer | ☐ Tournament | |
| ☐ Spectator | ☐ Tryout | |
| ☐ Other: _____ | ☐ Other: _____ | |

Position when injured: _____

(e.g. pitcher, batter, in dugout etc):

Type of Injury and Part of Body: _____

(i.e. fractured wrist, bruised ankle etc)

Cause of Injury: _____

(i.e. batted ball, hit by bat, sliding etc)

Description of the incident:_____
_____
_____
_____

Treatment Given: ☐ Medical _____ ☐ First Aid _____

Ambulance Attended: ☐ Yes ☐ No   Injured Person Transported ☐ Yes ☐ No  Hospital:_____

Name of person reporting (print): _____ Signature: _____

MSLL Safety Office (print): _____ Signature: _____

# MSLL Accident/Injury Reporting Procedures

**What to Report**

Any incident that causes any player, manager, coach, umpire, spectator or volunteer to receive medical treatment and/or first-aid must be reported to the MSLL Safety Officer. This includes even passive treatments such as the evaluation and diagnosis of the extent of the injury or period of rest. Any player who, in the opinion of an umpire, coach or manager, suffers loss of consciousness or memory loss due to an accident should be immediately removed from the game and the parents or guardians advised to seek a medical evaluation immediately.

**When to Report**

All such incidents described above must be reported to the Safety Office within 48 hours of the incident. The Safety Office is Bruce Davis and can be reached at 604 729 3456 or safety@msll.ca.

**Safety Office Responsibilities**

Within 48 hours of receiving the incident report, the Safety Officer will contact the injured party or the party's parents and:

- Verify the information received
- Obtain any other information deemed necessary
- Check on the status of the injured party