Revelstoke Youth Soccer Association
INCIDENT REPORT FORM

This form is to be filled out any time there is (1) an injury in connection with the activities of Revelstoke Youth Soccer (any injury serious enough to require medical attention), or (2) an incident involving a player, team official, team, game official or spectator that may require disciplinary action (e.g. matters of misconduct, breaches of FIFA Laws of the Game or RYSA/BCSA regulations). These incidents will be reviewed by the RYSA Board of Directors. The form should be submitted to a RYSA Board member within 24 hours. This form is also available from www.revsoccer.com

Date: _____
Name of person submitting incident report:_____
Phone: _____

Date and time of incident: _____
Description of the incident. Give full names and contact info wherever possible. Use the back if you need more room.

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Was medical treatment or other outside assistance required? Explain.

_____
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_____

Witnesses or people who can be contacted for further information about this incident (names and phone numbers, if available):

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