

Olney RFC – First Aider Accident/Injury Reporting Form

Please complete the following form in the event of player treatment/injury

Once complete photograph/scan this form and email to medical@olneyrfc.co.uk

In the event of a player being admitted to hospital (*This does not include those taken to A&E Department and allowed home*), an RFU Reportable Injury Form must be completed and sent to the RFU as described on the RFU Reportable Injury Form, plus a copy to the club as above.



About the person who had the accident/injury			
Full Name			
Address			
		Post Code	
Phone (of parent if child)		DOB/Age	
Name of additional contact (e.g. Next of Kin)			
Relationship to injured person		Phone	

About the person reporting the accident/injury			
Full Name			
Address			
		Post Code	
Role in club		Phone	
Signed		Date	

About the accident - when & where			
Date it took place:		Time	
Where it took place (e.g. room or pitch location)			
Description of activity at time of accident/injury			

About the accident – what happened?	
How did the accident happen, what was the cause?	

Details/description of Injury	Back	Front
STOP – Have you checked for concussion – Assessment complete/Result <i>Headache, Emotional, Appearance, Drowsy, Confused, Agitated, Seizure, Ears & Eyes</i>		Yes/No Pass/Fail

Action Taken					
Ambulance	Yes/No	Taken to Hospital	Yes/No	Advised to seek medical advice	Yes/No
Player/Parent (if child) signature			Date Signed		