GOLD COAST BASEBALL ASSOCIATION
INCIDENT REPORT FORM

SECTION 1

DATE OF GAME _____

HOME TEAM _____

VISITING TEAM _____

NAME OF PERSON MAKING REPORT _____

POSITION (eg umpire, scorer, manager) _____

DID AN EJECTION OCCUR? YES/NO if yes complete section 2

DID AN INJURY OCCUR ? YES/NO if yes complete section 3

Innings: _____ **Outs:** _____ **Count:** _____

Score: _____ **In Favour of:** _____

SECTION 2

Name of person ejected: _____

Ejected person's position: ( ) Manager ( ) Coach ( ) Player

( ) Other _____

Describe the incident that occurred and your subsequent actions. Include pertinent details concerning language, gestures, thrown equipment, or physical contact. Include any after effects.

SECTION 3

Describe how the injury occurred.

Was the person taken to hospital? YES/NO