



Please send a copy of this completed form to Kathy Urquhart- [kathy@specialolympicscalgary.ca](mailto:kathy@specialolympicscalgary.ca)

## Personal Information:

1. Report is being completed by \_\_\_\_\_
2. Phone Number \_\_\_\_\_
3. Email Address \_\_\_\_\_
4. What affiliate/community are you associated with? \_\_\_\_\_
5. What is your role within Special Olympics Alberta? \_\_\_\_\_

## Who was involved in the incident?

1. Full Name \_\_\_\_\_
  2. Phone Number \_\_\_\_\_
  3. Email Address \_\_\_\_\_
  4. What affiliate/community is this individual associated with? \_\_\_\_\_
  5. Was a coach, volunteer or parent supervising? Yes \_\_\_ No \_\_\_
  6. If yes, name those supervising \_\_\_\_\_
  7. Was anyone else involved? If so, who and how? \_\_\_\_\_
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## Nature of the Accident/Incident:

1. What was the location of this accident/incident? \_\_\_\_\_
2. Details of Accident/Incident (If you need further space to complete this, please complete on a separate piece of paper and attach to this form)

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3. List of witnesses to accident/incident \_\_\_\_\_  
\_\_\_\_\_

### **Actions Taken/ Treatment Administered**

1. What actions were taken/treatment was administered? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. By whom? \_\_\_\_\_

3. Was the athlete/Volunteer sent home? Yes \_\_\_ No \_\_\_

4. If yes, how and with whom? \_\_\_\_\_

### **Contact Notifications**

1. Was a parent/guardian notified? Yes \_\_\_ No \_\_\_ N/A \_\_\_

2. If yes, what is the name of the parent(s)/guardian(s)? \_\_\_\_\_

3. Date and time notified \_\_\_\_\_

4. Has Special Olympics Alberta already been notified? Yes \_\_\_ No \_\_\_

5. What member of staff did you notify? \_\_\_\_\_

6. Date and time notified \_\_\_\_\_

### **Please list any other information you wish to include on this form**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_