



OISA Incident Form

This report is required to be filled out within 24 hours by a Coach, Team advisor, or Chaperone for any incident of an OISA Rider, Coach, or volunteer in which they received an injury/medical treatment or have broken rules established by the OISA while at a practice or competition.

Date/Time of Report: _____

Reporter's Name: _____

Position (coach/advisor/chaperone etc): _____

Phone: _____ email: _____

Event/Activity: _____

Date and Time of Incident: _____

Location of Incident: _____

Please provide the following about the Person the report is about:

Name: _____ Age: _____

Address: _____

Phone: _____

Team/League _____

Provide full description of all events leading up to and including the incident:

Witnesses (Full Name and phone number)

Who responded to the incident (include all parties - Coaches, Chaperone, Ski Patrol, Paramedics, etc.): _____

Describe injury/damage (specify where on body, right or left side):

Provide a copy of this completed form to your OISA league president.



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Was First Aid treatment required? _____

If yes, who provided First Aid treatment? _____

Please provide description of surroundings, facility condition, and weather condition:

Other comments: _____

Verification Statement: By signing this document, I verify that this report is true and correct to the best of my knowledge.

Reporter's Signature: _____ Date: _____

Witness Signature _____ Date: _____



It is important to have written incident reports on file regarding injuries, property damage or other incidents that may result in a claim against your team, league and sports association. Many such claims allege negligence, and written reports prepared immediately after an incident occurs are invaluable in defending these types of claims. In the event of a serious injury, it is important to ask for written statements from witnesses and individuals actually involved in the incident. One copy of the report should be sent to the league president and one should be kept with the team records.

Provide a copy of this completed form to your OISA league president.