

Blackhawk Hockey Association Incident Report

This incident report is to be completed by Coaches, Members and/or players to capture details needed to fully investigate the incident and to put corrective actions in place. **All incidents will be handled discreetly and in a confidential manner unless it requires assistance outside the Board.**

Date of Incident: _____

Time of Incident: _____

Individual completing the form: _____

Incident Type:

- Injury
- Illness
- Fighting
- Property Damage
- Fire
- Inappropriate Behavior
- Inappropriate Language
- Harassment
- Other: _____

Name(s) of individual(s) involved:

Brief Description of Incident: (Include Photos if Appropriate):

Corrective Actions:

Individual Completing the Incident Form Signature:

***All incident forms are to be completed and turned in to the team liaison or other board member within 24-hours of the incident. The Board will review and determine if additional corrective actions will be taken beyond what is identified above. Coaching staff will be included when involving player incidents.**

Board Review Section Only: _____

Date Reviewed: _____

Additional Comments:

Board Member Signature: _____