



Celbridge LTC Incident Form

Adapted from Tennis Ireland Child Protection Fact Sheet 20

http://www.tennisireland.ie/clubs/child_protection

COACH/ LEADER IN ATTENDANCE	
INJURED PARTY	
Name	
Age/ DOB	
School	
Address	
Accident Details	
<ul style="list-style-type: none">• Date:• Time:• Exact Location• Injury• How happened	
Severity	
<ul style="list-style-type: none"><input type="radio"/> Minor<input type="radio"/> Considerate<input type="radio"/> Severe	
FIRST AID INVOLVED	YES / NO
MEDICAL ATTENTION REQUIRED	YES / NO
PARENTS INFORMED BY WHOM	YES / NO
FORM COMPLETED BY:	
REFERRED TO DESIGNATED PERSON	YES / NO
DESIGNATED PERSON SIGNATURE	