

# Utah High School Hockey

## Injury Report

Your name: \_\_\_\_\_ Today's date: \_\_\_\_\_

Date of incident: \_\_\_\_\_ Time of incident: \_\_\_\_\_

Name of player injured: \_\_\_\_\_

Player's team: \_\_\_\_\_

Team trustee of injured player: \_\_\_\_\_

Head coach of injured player: \_\_\_\_\_

Exact location where the injury took place: \_\_\_\_\_

\_\_\_\_\_

Explain in detail, to the best of your ability, how the injury occurred and any obvious contributing factors: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What was the physical injury to the best of your knowledge? \_\_\_\_\_

Was medical assistance called? \_\_\_\_\_ Was person removed in an ambulance? \_\_\_\_\_

Name, address and phone of the transporting company: \_\_\_\_\_

\_\_\_\_\_

Witnesses to injury:

1. \_\_\_\_\_ phone: \_\_\_\_\_

2. \_\_\_\_\_ phone: \_\_\_\_\_

3. \_\_\_\_\_ phone: \_\_\_\_\_

4. \_\_\_\_\_ phone: \_\_\_\_\_

\_\_\_\_\_  
Team trustee signature

\_\_\_\_\_  
Date

Team trustee to submit completed form to [UHSHDiscipline@gmail.com](mailto:UHSHDiscipline@gmail.com)

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