

Franklin Township PRELIMINARY ACCIDENT REPORT

NAME:(injured) _____ **DATE:** _____

ADDRESS: _____ **PHONE:** _____

CITY: _____ **ZIP:** _____

TEAM: _____ **MANAGER** _____

DIVISION IN, WHICH ACCIDENT OCCURRED

SENIOR JUNIOR MAJOR MINOR FARM T-BALL SOFT BALL

No treatment needed

First Aid at field

To doctor

To hospital

Other

Struck by: Collided with: Other:

- | | | |
|-----------------|---------------------------------|--------------------------|
| 1. Pitched ball | 5. Fence | 8. Tripped |
| 2. Batted ball | 6. Backstop | 9. Fell |
| 3. Thrown ball | 7. Hit dirt too hard by sliding | 10. Over exertion |
| 4. Bat | 8. Umpire, Manager, Coach | 11. Pre-Exist Med. Cond. |

Unsafe Conditions? Yes No

1. Uneven field surface such as holes, humps, etc.
2. Foreign objects, such as glass, rakes, stones, etc.
3. Congestion during practice or games
4. Weather conditions, such as rain, sun, darkness
5. Lack of poor-fitting, protective equipment.
6. Other _____

Unsafe Acts? Yes No

- | | |
|---------------------------|-----------------------|
| 1. Mishandled ball | 9. Poor running form |
| 2. Mishandled bat | 10. Wild pitch |
| 3. Poor evasive action | 11. Wild throw |
| 4. Incorrect sliding form | 12. Wild swing |
| 5. Not watching the ball | 13. Distracted |
| 6. Awkward position | 14. Lack of attention |
| 7. Player out of position | 15. Horseplay |
| 8. Lack of grip on bat | 16. Other |

Brief Statement of What Happened _____

NOTE: This form is for Little League purposes only. When an accident happens obtain as much information as possible. Send a copy of this form to the FTLL Safety Officer and he or she will forward it on to Little League Headquarters in Williamsport and the District Safety Officer.

The reason for this form is to establish a record of all accidents prior to any lawsuits and to provide Little League Baseball, Incorporated and Franklin Township Little League with advanced information