

ELBOW

HIP& **SHOULDER**

SJ04 **INCIDENT REPORT FORM -** 2020

| | This form must b | e emailed by <u>9am TUESDAY</u> followi | ing your match to SANFL Junior | s at <u>sanfljuniors@sanfl.com.a</u> | <u>ıu</u> | | | | | | |
|--|---|---|--------------------------------|--------------------------------------|---------------------|--|--|--|--|--|--|
| SEC | TION 1 | | | | | | | | | | |
| DES | CRIPTION OF INCIDENT: | | | | | | | | | | |
| REPORTED PLAYER NAME: NUMBER: CLUB: | | | | | | | | | | | |
| LOC | LOCATION (Where the incident occurred on the ground): | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| PLA | YERS INVOLVED (ALL Pla | ayers): | | | | | | | | | |
| | | | | | | | | | | | |
| WHERE THE BALL WAS (e.g. In the area, Being disposed of, Behind the play): | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | IF INCIDENT OCCUPS | | | | | | | | | |
| IN۱ | WHICH QUARTER DID TH | IE INCIDENT OCCUR? | | | | | | | | | |
| Λ II + | the following questions: | are in relation to STRIKING/I | VICVING/TDIDDING/CU/ | ARGING/ROUGH COND | UCT and must | | | | | | |
| | answered. (Please place | | NICKING/ TRIPPING/CHA | KAGING/ KOOGH COND | DCT and must | | | | | | |
| 1. | How hard was the Strike/Kick/Charge/Trip: | | | | | | | | | | |
| | FORCEFUL | HARD | MEDIUM | SOFT | | | | | | | |
| 2. | Where was contact made: | | | | | | | | | | |
| | HEAD | STOMACH/CHEST | GROIN | LEGS | | | | | | | |
| 3. | Area used in Strike/Kick: | | | | | | | | | | |
| | FIST | OPENHAND | ELBOW | KNEE | FOOT | | | | | | |
| 4. | Motion of Strike/Kick: | | | | | | | | | | |
| | JAB | FULLSWING | OTHER | JUMPER PUNCH | | | | | | | |
| 5. | Was the player provoked: | | | | | | | | | | |
| | YES | NO | | | | | | | | | |
| 6. | 1 1 , | | | | | | | | | | |
| | YES | IF SO, HOW MANY? | NO | | | | | | | | |
| 7. | What was usedin trip: HAND | FOOT | | | | | | | | | |
| _ | | | | | | | | | | | |
| 8. | Do you believe action was | | | | | | | | | | |
| | YES | NO | | | | | | | | | |
| 9. | Was Player going for the ball when contact was made: | | | | | | | | | | |
| | YES | NO | | | | | | | | | |
| 10. | What part of the body did | the offending Player use: | | | | | | | | | |

LEGS

OTHER

| 11. | vvas contact iront on | | | | | | | | |
|------|------------------------------|-------------------------|-------------------------------------|----------------|--------------------|----------------------|--|--|--|
| | YES | NO | | | | | | | |
| 12. | Where was the conta | act made on the other | player: | | | | | | |
| | BODY | HEAD/NECK | LEGS | | | | | | |
| 13. | What force was used | in their actions: | | | | | | | |
| | HARD | FORCEFUL | MEDIUM | | SOFT | | | | |
| Que | estions relating to A | busive Language/I | Misconduct must be ans | swered (Please | give as much infor | mation as possible). | | | |
| 1 | NA / | | | | | | | | |
| 1. | What was said and to | wnom: | | | | | | | |
| 2. | If misconduct please | estate: | | | | | | | |
| The | following questions mu | ust be answered. (Plea | se place a X in boxes that m | nay apply). | | | | | |
| | What happened to the | | | | | | | | |
| INJU | | STRETCHERED OFF | LEFT GROU | IND | BLEEDING | DAZED | | | |
| NOT | HING | | | | | | | | |
| 4. | What if anything did ar | ny of the players say a | bout the incident: | | | | | | |
| | | | | | | | | | |
| | What happened after | | | | | | | | |
| FIGH | ΙΤ | PUSH & SHOVE | NOTI | HING | VERBAL COMMENTS | 5 | | | |
| SECT | TION 2 | | | | | | | | |
| DES | CRIPTION OF INCIDEN | IT: | | | | | | | |
| | | | | | | | | | |
| TIM | 1E OF INCIDENT: | | LOCATION OF INCIDENT | • | | | | | |
| | | | | • | | | | | |
| | OTHER REI | LEVANT INFORMATIO | DN: | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| SE | CTION 3 | | | | | | | | |
| NA | ME OF PERSON MAKI | NG REPORT: | | | | | | | |
| | | | | | | | | | |
| EM | IAIL ADDRESS: | | | | | | | | |
| | | | | | | | | | |
| CO | NTACT NUMBER: | | | | | | | | |
| | | | | | | | | | |
| SAI | NFL Juniors use only: | | | | | | | | |
| | | , . | | | | | | | |
| | Lodged with SANFL Juniors on | | | | | | | | |
| inc | Incident refereral number | | | | | | | | |