

INCIDENT REPORT FORM - NON INVESTIGATION 2020

This report is to be used for incidents to be referred to but not for investigation. This report is to be emailed to SANFL Juniors (sanfljuniors@sanfl.com.au) by midday Tuesday following the game.

Match:	v			
Venue:	Date:	Grade:		Boys/Girls
Quarter:Approx. Time:				
Reported Player:		No:	Club:	
Offended Player:	I	No:	Club:	
Reported Charge (eg. striking):		Law No:		
Club Official Name:		Mob:		
Email:	Sign	nature:		
Section 1 PRECEDING PLAY- DESCRIBE THE PLA e.g. Player #17 received a handball th contact was made by player #23.				her the football when
I saw				

Section 2

LOCATION – where did the incident occur on the ground?

Mark your position and where the incident occurred on the diagram below.

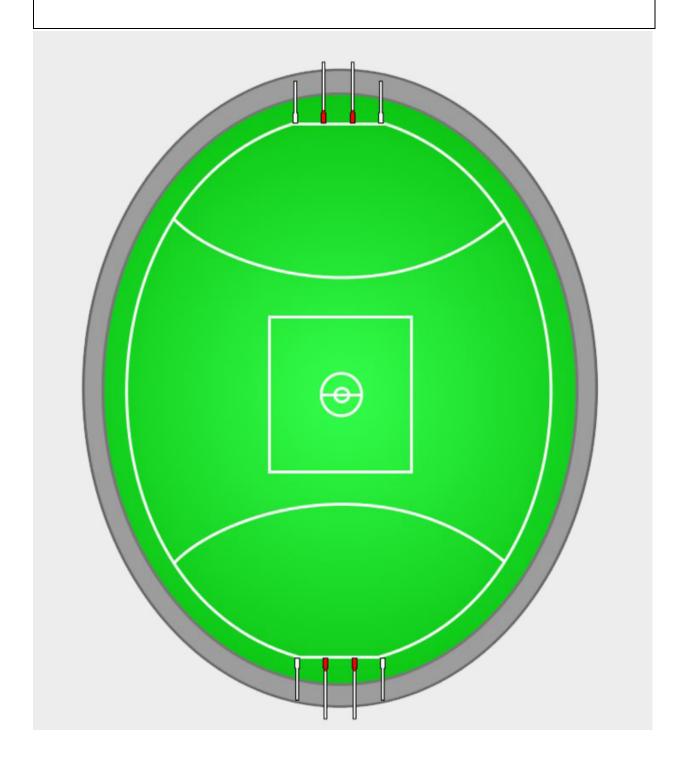
Use symbols and letters to identify Umpires, players, officials as necessary.

Eg.

Umpire 1 – U1 Coach 1 – C1

Umpire 2 – U2 Coach 2 – C2

Offending player – OP Coaches box – CB



Section 3
THE INCIDENT –CONTACT (STRIKING/KICK/CHARGE/TRIP)
e.g. Player #23 contacted Player # 17 as he/she was bent over gathering the football. Player #23 appeared to
line up player #17 and run at the player to make contact. Player #23 made contact to the head with his/her arr
Isaw
Section 4
FOLLOWING THE INCIDENT
(Circle any that apply)
NO FREE KICK AWARDED FREE KICK AWARDED
- ,
PLAYER OFFENDED AGAINST
Did the offended player;
 Appear injured? YES / NO Were they bleeding? YES / NO
- Leave the field? YES / NO
If yes, was assistance required? STRETCHER / TRAINER / NO
- Return to play?
- Return to play:
•
PROVOCATION
Did you see or hear any previous exchange between the players involved in the incident?
YES / NO If yes, please provide details below
ANY OTHER INFORMATION

SANFL Junio	rs OFFICE USE ONLY	
Report #		
Received		
	Date	Time