

## Safety Incident and Near-Miss Tracking Form

All injuries and other safety-related incidents or “near-misses” involving players, coaches, managers, umpires or spectators should be reported via completion of this form, which should be provided within 48 hours to the GLL Safety Officer: Jeff Troian , troianj@cox.net, 860.380.0546.

Date	Approximate Time	Location (Field and Field Number if applicable)	Type of Filing: Injury, Near-Miss Injury or Other	Victim (or Near Victim): Player, Coach, Manager, Umpire or Spectator	League	Team

Injured			If injured is a minor, guardian information is required		
Last Name	First Name	Age	Last Name	First Name	Phone

<b>Describe the incident, including any applicable events leading up to it:</b>

<b>Describe any treatment provided other than given by emergency personnel, and if emergency response was not called, what the outcome was.</b>

<b>Was emergency response requested? If so, what treatment and diagnosis were given, and what was the outcome?</b>

<b>List names and contact information for any key witnesses or participants.</b>

\_\_\_\_\_  
Signed (Manager or Adult Supervisor Completing Form)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date