

Incident Report



Wooster Youth Baseball

Please complete the following form and submit to the league Safety Officer

Date of Incident _____

Time of Incident _____ Location of Incident _____

Person Making Report _____ Phone Number _____

Witnesses / Umpires _____

Person(s) Involved _____

Location of Incident _____

Type of Incident: ☐ Injury ☐ Game Protest ☐ Conduct ☐ Equipment Failure

Describe What Happened:

What Action Was Taken? (ie. Player/Coach/Spectator Ejected, Police/Ambulance Called)

Signature of Person Reporting

Date of Report