



# Incident Report

Town Reporting: \_\_\_\_\_ Date: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

- Home Field       Away Field       Other

Details:

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Ejections:

- Player       Coach       Coach       Parent       Fan       Other

Name of person(s) ejected:

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- Police called       Ambulance called

Date Incident was submitted to OCYFL: \_\_\_\_\_  E-mail       In-person

Who submitted the report to OCYFL? \_\_\_\_\_

**Executive Board Only:**

- Spoke with reporting town       Sent form to the other town involved       Other

Outcome of report:

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OCYFL Board Member handling Incident: \_\_\_\_\_