**Granby Little League**

**League ID: 02070604. Granby, Connecticut, USA**

**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.

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| --- | --- | --- | --- | --- | --- | --- |
| **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** |
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| **Injured** | | | **If injured is a minor, guardian information is required** | | |
| **Last Name** | **First Name** | **Age** | **Last Name** | **First Name** | **Phone** |
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| **Describe the incident, including any applicable events leading up to it:** |
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| **Describe any treatment provided other than given by emergency personnel, and if emergency response was not called, what the outcome was**. |
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| **Was emergency response requested? If so, what treatment and diagnosis were given, and what was the outcome?** |
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| **List names and contact information for any key witnesses or participants.** |
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Signed (Manager or Adult Supervisor Completing Form Printed Name Date