### A logo of a football team  Description automatically generated

###  **Operational Guidelines**

###  November 2023

### **Mission Statement**

1.    To promote, support and develop the game of soccer within our boundaries by providing youth and adults with the opportunity to play the game. To further the education of the members in the skills of soccer and to encourage good sportsmanship.

2.    To help individuals to develop their character as resourceful and responsible Members of their community by providing opportunities, through the game of soccer, for their mental, physical, social and leadership development.

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### **1-Players**

1. A player (parent or guardian) shall register by a method provided by The Club and pay the required fee prior to participation in any Club activity.
2. A player (parent or guardian for Under 18) is deemed to be a general member of The Club for the period date of registration (current year) to March 31st (following year).

### **2-Teams**

1. The Club will operate teams at all levels of play, consistent with player registration and competition availability. Players will be assigned to Club teams at the sole discretion of the Club.

### **3-Coaches**

1. Coaches are expected to act with appropriate conduct at all times and in this regard, The Club has adopted the principles of “Fair Play" to assist coaches in understanding what “appropriate conduct" means. The concept of fair play can be defined by five basic principles:
	1. Respect the rules
	2. Respect the officials and their decisions
	3. Respect the opponents
	4. Give everyone an equal chance to participate
	5. Maintain your self-control at all times
	6. Volunteer Screening annually
2. Coaches are not responsible for, or expected to provide, transportation of players to and from games or practices. Coaches are not responsible for washing team uniforms. Each player will be given a shirt, shorts and socks at the beginning of the season, which must be returned at the end of the season.
3. Each coach is provided with a first aid kit, coaches are asked to provide first aid as appropriate. As a guideline, administer first aid as if an injury had occurred to a family member.
4. Coaches are asked to distribute at the beginning of the season and collect at the end of the season, Club owned equipment. See “Equipment" section for more details.
5. Develop a team Emergency Action Plan (see below)

### **4-Uniform**

1. The Club colours consists of Royal Blue/Yellow. Registration may require additional colours for teams in the same division. The Club crest will be emblazoned on the left breast of the shirt and a number on the back. The Club will provide jerseys, shorts and socks for all youth age groups. (Jerseys only for Adult age groups). Jerseys must be returned at the end of each season.

Variations to the uniform must be approved by the Board of Directors.

1. The Club will provide uniforms for its Mini program each year. This uniform will consist of a coloured jersey, shorts and socks, which the players will keep.

### **5-Equipment**

1. In addition to the uniforms described above, The Club will provide the following.

a/ Club Referees:

* + 1. Regulation shirt, shorts, socks
		2. Linesman flags
		3. Whistle and lanyard
		4. Rule books
		5. Card book

 b/ Club Coaches:

* + 1. Practice balls (size 4 or 5)
		2. Game ball (size 4 or 5)
		3. First aid kit
		4. Goal net (OCSL Teams only)
		5. Corner flags (2) (OCSL Teams only)
		6. Team Uniform Kits

c/ Mini Soccer:

* + 1. Practice Ball (size 3)
		2. Coloured jersey, shorts and socks
		3. Players will keep balls and uniforms
1. All equipment remains the property of The Club and may be requested returned at any time. All equipment must be returned to The Club at the end of each season.

**6-Staff Positions**

1.Club Administrator (Contract Position)

The Club administrator works under the supervision of the President and Treasurer.

This is a non voting position.

 Webmaster

### **7-Discipline**

1. Player, team and team official’s discipline for game infractions will be handled in accordance with the procedures published by the Eastern Ontario District Soccer Association.
2. Players, teams and team officials are solely responsible for any fines levied against them by the League organizations in which they play. Any member who infringes the Bylaws, Operational Guidelines of The Club, or brings The Club into disrepute, may be reprimanded, suspended or expelled from The Club after a hearing by the Board of Directors at which the member may attend at the members discretion.

### **8-Disputes**

1. Any member may request the Board of Directors to settle a dispute by submitting, in writing, to the Board of Directors, the nature of the dispute and to request a hearing of all concerned. The hearing will be heard by the Board of Directors within fourteen days from receipt of the request.

### **9-Obligation of Members**

1. Members are required to abide by the Bylaws and Operational Guidelines of The Club.

### **10-Obligation of the Club**

1. To ensure that all members are aware of, and in compliance with, the By Laws and rules and procedures of the Eastern Ontario District Soccer Association.
2. To follow the guidelines as outlined in Ontario Soccer’s Privacy Policy
3. To follow the Concussion Policy as outlined in Ontario Soccer’s Rowan’s Law policy
4. To adhere to the Harassment Policy as published and approved by Ontario Soccer
5. Links to the above can be found on the Ontario Soccer web site
	1. https://cdn1.sportngin.com/attachments/document/c816-2837579/Ontario\_Soccer\_Policies\_\_March\_25\_\_2023\_.pdf

**11-Refund Policy:**

**Amended**

 March 2024

1/ Player refund form to be completed and emailed to Club Treasurer

Refund request must be approved by the Director of the appropriate age Group:

Director of Youth League

Director of Mini Soccer

Director of Adult Soccer

Player refunds may be issued under the following situations:

2/ Medical circumstances: Medical certificate may be requested

Prior to June 3rd 100 % of registration rate refund

 After June 3rd 50 % of registration rate refund

3/ Player/Parent/Guardian request:

 Prior to June 3rd 100% of registration rate refund less $25 Admin charge

4/ Player suspension/discipline circumstances:

 No refund will be issued

Refund request will be issued to the individual of record making the initial registration payment, in the manner initial payment was made.

No medical refunds/exemptions will be issued for prior years.

Individual medical situation cases may be eligible for a current year discount (50% of early registration rate for applicable age group) at the discretion of the Board.

In the event a player cannot be placed on an appropriate team, a full refund will be issued

**12-Volunteer Screening**

As per Ontario Soccer guidelines, volunteers working with players under 18 years of age will be asked to participate in the following screening process:

Competitive Teams:

* interview with the Head Coach and/or President
* Police Record Check for working with the Vulnerable Sector (yearly)
* attend preseason meeting

Recreation and Grassroots Teams:

* discussion with the Program Coordinator
* attend preseason meeting

**13-Harassment Policy**

AMBUSC, as an Ontario Soccer Member Club follows their Harassment Policy:

https://www.ontariosoccer.net/governing-documents-screening-harassment

**14-Extreme Heat Policy**

For AMBUSC Mini Programs:

* U4, U6, U8 only:  If at 3:00 pm on a game day, the temperature and or humidex forecast for 6 pm is equal to or greater than 40, the AMBUSC Mini programs (games and practices) for that evening shall be cancelled.
* U9 and older:  please check the website for the league your team plays in for the league's policy.  EOSL     [GLSL](http://www.glsl.ca/PageDisplay.aspx?SideMenuID=19)   [OCSL](http://www.ocslonline.ca/Default.aspx)

**Notice of Extreme Heat Cancellation**

If the Extreme Heat cancellation policy is triggered, the AMBUSC shall post a Cancellation Notice on the website by 3:30 pm.

(Note:  will be determined by listing on [Environment Canada weather website](https://www.weather.gc.ca/city/pages/on-58_metric_e.html))

**15-Emergency Action Plan**

Emergency Action Plan November 2023 Update Policy:

 It is the policy of the Club that the Team Coach create an Emergency Action Plan (EAP) for each facility used by the team for practice, training or games. An EAP should be prepared for the facility or site where you normally practice and for any facility or site where you regularly host games. For away games, coaches or team managers should ask the host team or host facility for a copy of their EAP.

Purpose: An Emergency Action Plan (EAP) is a plan designed by a coach to assist him or her in responding to emergency situations. The idea behind having such a plan prepared in advance is that it will help the coach, and others, respond in a professional and clearheaded way under stressful circumstances. An EAP can be simple or elaborate, but should cover off the following seven items at a minimum:

1. Designate in advance who is in charge in the event of an emergency (this could be the coach, assistant coach, manager or team ‘first aider’).

 2. Have a cell phone with you, with battery fully charged. If this is not possible, know exactly where a telephone that you can use is located.

 3. Have emergency telephone numbers with you (facility manager, fire, police, ambulance, public safety) as well as contact numbers for your participants (parents, guardians, next of kin, family doctor).

4. Have on hand a medical profile for each participant, so that this information can be provided to emergency medical personnel. Include in this profile a signed consent from the parent/guardian to allow medical treatment in an emergency (see Appendix A – Medical Information Form).

5. Have a First Aid kit accessible and properly stocked at all times. All coaches are strongly encouraged to pursue First Aid training.

 6. Designate in advance a call person (the person who makes contact with medical authorities and otherwise assists the person in charge).

7. Prepare a Facility Description Form (Appendix B) so your call person can give emergency vehicles precise instructions to reach your location or site. Accident/Incident Guidelines recommends that the following procedure is used when dealing with an accident or incident.

1. Stay calm but act swiftly and observe the situation. Is there danger of further injuries?

 2. Listen to what the injured person is saying.

 3. Alert the first-aider who should take appropriate action for minor injuries or determine if emergency services needs to be called.

4. In the event of a serious injury or one requiring specialist treatment, call or appoint someone to call the emergency services (in accordance with the Emergency Action Plan).

5. Appoint someone to deal with the rest of the group and ensure that they are adequately supervised.

6. Do not move someone with major injuries. Wait for the emergency services personnel.

7. Contact the injured person’s parent/guardian.

8. If the player does not return to play (for the remainder of the game or practice, or for the next game or practice) and/or emergency services are contacted complete the Accident/Incident Report Form (see Appendix C).

9. Send the Accident Report Form to the Club President. The President will refer the Accident Report Form to the Board at its next meeting for review. The Board may provide recommendations to the President to try to prevent such accidents/injuries from occurrence in the future.

The following forms are used to prepare the EAP.

**Medical Information Form Facility Description Form Accident Report Form**

**Appendix A**

Medical Information Form AMBUSC

 Team Name \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player Information \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OS # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Jersey No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Given name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Considerations: Identify all conditions which may require medical attention, and any medication currently being taken.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In case of Emergency

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone # Mobile Home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Information

 Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Work Phone Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address - home E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

work Parent/Guardian Information

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home Phone/ Work Phone /Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E-mail address - home E-mail work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix B**

Facility Description\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Facility Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # of Facility Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Home Facility \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Nearest hospital \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Direction to the Nearest Hospital \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone number - 911 for all emergencies

Team Emergency Management Officials

 Name of the 1st Person in Charge \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the 2nd Person in Charge\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the 3rd Person in Charge\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of the 1st Person to make call\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of the 2nd Person to make call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the 3rd Person to make call\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Coach Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant Coach Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix C**

Accident Report Form To be completed by the First Aider, Coach or Manager within 24 hours of the incident.

1. Site where accident took place (i.e. facility, field, other): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 2. Date and time of accident/ incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name of person in charge of session/ competition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Name of injured person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Address of injured person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Team Name, League and Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Nature of accident/ incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Give details of how and precisely where the accident took place. Describe what activity was taking place, e.g. training program, during a game, etc. If during a game, give details if a call was made (e.g., red card, penalty kick, etc.). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Give details of the action taken including any first aid treatment and the name (s) of the first-aider(s). \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 10. Were any of the following parties contacted? Police, Ambulance, Parent/Guardian. If Yes, provide details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 11. What happened to the injured person following the accident? (E.g. went home, went to hospital, carried on with session) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All of the above facts are a true and accurate record of the incident/ accident.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_