



# Sansei Baseball League

## Injury Report

This form must accompany your First Aid Kit. If the injury requires emergency treatment, notify your division commissioner ASAP (within 24 hrs).

|                                   |                                   |                                |                                       |  |                                |                            |
|-----------------------------------|-----------------------------------|--------------------------------|---------------------------------------|--|--------------------------------|----------------------------|
| Date:                             |                                   | Location:                      | <input type="checkbox"/> Guenser Park | <input type="checkbox"/> North High School | Field:                         |                            |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Softball | Division:                      | <input type="checkbox"/> Tball        | <input type="checkbox"/> PeeWee            | <input type="checkbox"/> Minor | Year:                      |
|                                   |                                   | <input type="checkbox"/> Major |                                       |  |                                | <input type="checkbox"/> 1 |
|                                   |                                   |                                |                                       |  |                                | <input type="checkbox"/> 2 |
|                                   |                                   |                                |                                       |  |                                | <input type="checkbox"/> 3 |

Team Names

|          |  |      |  |
|----------|--|------|--|
| Visitor: |  | Home |  |
|          |  | :    |  |

### Injured:

Player Name:

Team Name:

|  |  |
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|  |  |
|--|--|

Coach Name:

Parent Rep Name:

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Description of Injury:

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Description of How Injury Occurred:

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Treatment of Injury: (Clean wound, Iced Ankle, Taken to Emergency Facility, etc.)

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Comments: (use back of page if needed)

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