



REPORT OF SERIOUS INCIDENT (TOURNAMENT PLAY)

This form ***MUST*** be used ***BY THE TOURNAMENT DIRECTOR*** to report whenever the following occurs:

1. *Fighting occurs between players*
2. *Fighting occurs between adult coaches, parents, or spectators*
3. *Fighting occurs between a coach(s) and a player(s), parent(s) and a player(s), spectator(s) and a player(s)*
4. *Any member of the referee team is verbally threatened or physically attacked*
5. *Law enforcement is called to preserve or restore order.*

DATE: _____ TIME: _____
TOURNAMENT: _____
LOCATION: _____ STATE: _____
SECTION: _____ AREA: _____ SPONSORING REGION (S) #: _____
SPONSORING REGION (S) NAMES: _____

TEAMS INVOLVED IN INCIDENT: Boys: _____ or Girls: _____

1. REGION (S) #: _____ REGION (S) NAME: _____ DIV.: _____
TEAM NAME: _____
COACH'S NAME: _____

2. REGION (S) #: _____ REGION (S) NAME: _____ DIV.: _____
TEAM NAME: _____
COACH'S NAME: _____

DESCRIPTION OF INCIDENT: _____

WITNESS #1: _____ WITNESS #2: _____
(Use Back side for additional witnesses **and/or contact information**)

POLICE REPORT TAKEN? YES ___ NO ___ If "YES" REPORT #: _____

OFFICER TAKING REPORT: _____ BADGE #: _____

REPORTING REQUIREMENTS: *Must immediately contact in person, your Section Director, RC, and AD and send copy of report to RC's involved, your RC, AD, SD, National Director of Tournaments, and the National Support and Training Center.*

TOURNAMENT DIRECTOR: _____
SIGNATURE: _____
