**FORM – INCIDENT REPORT FORM**

Policy Number FO-003-00008

**All Incident Report Forms Must Be signed off by Club Official**

**Document Control**

**Version Control**

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| **Date Approved** | **Version** | **Author** | **Review Date** | **Review By** |
| 3/2/2014 | V1 | WDNA | 31/12/2014 | WDNA President / Secretary |
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**Approval**

Delegation required for approval: *Association Board*

Approving officer:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Purpose and Background**

To assist in consistency and accuracy in following procedures and reporting on the issues covered by Western Districts Netball Association (WDNA)’s Member Protection Policy, the following document is to be used:

***ATTACHMENT INCIDENT REPORT FORM***

**This Incident report form is to be completed on incidents occurring within the Western Districts Netball Association (WDNA) competition, program or event and must be lodged with the WDNA Secretary as soon as possible on the day, or within 48 hours following the alleged incident.**

**INCIDENT DETAILS**

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| **Club Official Name:** | **Position** |
| **Signature:** | **Date:** |

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| **Reporting Details (Person reporting incident) 🞎 Over 18 🞎 Under 18** | | |
| **Date:** | **Court Number:** | |
| **Name:** | | |
| **Address:** | | |
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|  | | |
| **Ph (Home):** | **Mobile:** | |
| **Email:** | | |
| **Club:** | **Team No:** | |
| **Current Role / Status in: Association , Club or Team** | | |
| 🞏 Athlete/player 🞏 Coach / Assistant Coach 🞏 Umpire 🞏 Employee (Paid)  🞏 Administrator (Volunteer) 🞏 Parent 🞏 Spectator 🞏 Support Person  🞏 Official: (position)  🞏 Other: | | |
| **Incident involved**  **Club / Team (include team No):**  **Umpire: (Name , Club and contact)** | | **Incident occurred against**  **Individual (name):**  **Umpire: (Name , Club and contact)** |

**SUMMARY OF INCIDENT**

**ALLEGED OFFENCE:**

***Please tick appropriate offence, if more than one offence, tick appropriate boxes.***

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| **🞎** | Fighting / striking with a clenched fist. | **🞎** | Using abusive, obscene and / or threatening language. |
| **🞎** | Striking with an open hand. | **🞎** | Striking with ball or other object. |
| **🞎** | Kicking / attempting to kick. | **🞎** | Deliberately tripping an opponent. |
| **🞎** | Attempting to strike with a clenched fist. | **🞎** | Deliberately elbowing. |
| **🞎** | Racial / discriminatory abuse. | **🞎** | Undue rough play. |
| **🞎** | Unsporting conduct, including disputing decisions. | **🞎** | Repeated deliberate infringements. |
| **🞎** | Other (Please list): | | |

***Please answer the following:***

1. Was a warning given to the person during the game? 🞎 Yes 🞎 No

If yes, by who?

1. Was the player suspended for a specified period during the game? 🞎 Yes 🞎 No

If yes, for how long? (e.g. 3 centres, 3 mins)

1. Was the player ordered off for the whole game? 🞎 Yes 🞎 No
2. Was the person abusive towards the Officials after the game? 🞎 Yes 🞎 No
3. Was the person abusive towards anyone else? 🞎 Yes 🞎 No
4. If the matter is investigated you may be required to appear and give evidence.

Will this cause difficulty for you? 🞎 Yes 🞎 No

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| **Please detail - What happened? - When and where did it happen? - Who was involved?** |
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**OFFICE USE ONLY**

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| **Received by WDNA Official** | |
| **Name:** | **Position:** |
| **Signature:** | **Date:** |
| **How was acknowledgment done:** 🞎 Phone 🞎 Email 🞎 In Person 🞎 Letter | |
| **Date complainant advised of progress:** | |
| **How was progress advised :** 🞎 Phone 🞎 Email 🞎 In Person 🞎 Letter | |

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| --- | --- |
| **Date and Venue hearing was conducted:** | |
| **List name and position of WDNA Officials at the Hearing:** | |
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| **List name and position of others at the Hearing:** | |
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| **Outcome of the Hearing:** | |
| **Charges:** | |
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| **Penalty:** | **Commencement date and duration** |
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| --- | --- |
| **Name:** | **Signature:** |
| **Date Complete:** | **Position Held:** |
| **Comments:** | |
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