



Perkins Slade Incident Notification Advice Form for Competitions Only

Please return form to:
David Strain
British Judo Association
Suite B, Technology Centre
Epinal Way
Loughborough
LE11 3GE

DETAILS

COMPETITION.....VENUE.....
SENIOR REFEREE.....
TOURNAMENT DIRECTOR.....DATE.....

INCIDENT/ACCIDENT

INJURED PERSON: NAME.....
CLUB.....
GRADE.....WEIGHT.....
OPPONENT: NAME.....
CLUB.....
GRADE.....WEIGHT.....

WITNESSES

REFEREE & CORNER JUDGES.....
.....SENIOR RECORDER.....

DESCRIPTION OF WHAT OCCURRED INCL. ANY ALLEGATION OF PROFESSIONAL NEGLIGENCE

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.....
.....

MEDICAL

WAS FIRST AID ADMINISTERED ON SITE?

Yes	No
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STATE IF SENT TO HOSPITAL

Yes	No
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BRIEF DESCRIPTION OF INJURY:

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.....

ATTACH ACCIDENT REPORT (IF AVAILABLE)

OFFICIALS SIGNATURES (I CONFIRM THE ABOVE INFORMATION IS TO THE BEST OF MY KNOWLEDGE ACCURATE)

SIGNATURE:.....TOURNAMENT DIRECTOR

SIGNATURE:.....SENIOR REFEREE

INJURIES TO BE RECORDED ON THIS FORM MUST INCLUDE:

- ANY FRACTURE OR SUSPECTED FRACTURE (other than to toes, fingers, thumbs)
- DISLOCATION OR SUSPECTED DISLOCATION OF THE SHOULDER, HIP, KNEE, SPINE.
- INJURY INVOLVING EITHER REFERRAL TO OR ACTUAL HOSPITAL TREATMENT.
- ANY OTHER SERIOUS INJURY THAT IN THE OPINION OF THE CLUB OUGHT TO BE REPORTED. THIS IS PARTICULARLY RELEVANT WHERE MINORS ARE INVOLVED.
- ANY HEAD INJURY
- UNCONSCIOUSNESS