

RFU REPORTABLE INJURY EVENT REPORT FORM

Please use this form to report any injuries that occur whilst playing rugby or taking part in organised squad rugby training sessions that fit any of the following definitions:

- An injury which results in admission to a hospital intensive care unit, high dependency unit, specialist spinal or head injury unit.
- Deaths which occur during or within 6 hours of a game finishing.
- Any injury that is likely to result in an insurance claim to the RFU insurers

Date of report:	Time of report:
Date of injury:	Time of injury:
Player's name:	DOB or Age:
Club/School:	Team:
Game: <input type="checkbox"/>	Training: <input type="checkbox"/>

Nature of suspected injury:

Category:

- An injury which results in admission to a hospital intensive care unit, high dependency unit, specialist spinal or head injury unit.
- A death which occurred during game or within 6 hours of a game finishing.
- An injury that is likely to result in an insurance claim to the RFU insurers

Game Injuries Only

Opposition Club:	Team:
Venue:	Name of Referee:

Name of reporting person:

Position within Club/School:

Contact Telephone Number(s):

Once completed, please send this form to the RFU Sports Injuries Administrator:

Email: sportsinjuriesadmin@therfu.com

Fax: 0870 143 2423 Tel: 0870 143 2421

Post: Sports Injuries Administrator, Rugby Football Union, Rugby House, Rugby Rd, Twickenham, TW1 1DS.

The RFU only uses this data for contacting individuals and/or their clubs who are identified as requiring support in the case of a serious injury.