

RFU REPORTABLE INJURY EVENT REPORT FORM

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

1. An injury which results in the player being admitted to a hospital.
2. Deaths which occur during or within 6 hours of a game finishing.

Date of report:		Date of injury:	
Player's name:		DoB or age:	
Club/School etc.		Team:	
Nature of suspected injury:			
Category:			
<ol style="list-style-type: none"> 1. An injury which results in the player being admitted to a hospital. 2. Deaths which occur during or within 6 hours of a game finishing. 			

Injured player contact details

Player's contact number:			
Additional contact (e.g. Next of kin) name:			
Relationship to player:		Phone number:	

Please submit as much of the following information as you can, as soon as possible following the incident.

The RFU uses this data for contacting individuals (via the RFU Injured Players Foundation) and/or their clubs who are identified as requiring immediate support in the case of a potentially catastrophic injury. Information regarding the circumstances of injury may be used anonymously to monitor injuries throughout the game. Further information is available in the privacy policy at [IPF website](#).

Game	Training	Grass	Artificial grass	Other surface
Was there (please select)				
Appropriate first aid in place?		Yes	No	
Any alleged foul play relating to the injury event?		Yes	No	

GAME INJURIES ONLY

Opposition Club/School etc.:		Team:	
Name of Referee:		Venue:	

Name of reporting person:	
Position within Club/School etc.:	
Contact telephone number	

Once completed, please send this form to: RFU Sports Injuries Administrator:
sportsinjuriesadmin@rfu.com or report by phone on 0800 298 0102

