



WILLAMETTE UNITED FC INJURY REPORT FORM

Player safety is our number one priority. The club goes to great measures to make sure our fields, equipment and activities are as safe as possible. In order to support our members, the club has made this injury report form available to all WUFC players. If any WUFC player suffers an injury that requires medical attention from a doctor, nurse practitioner or other medical professional we ask that this form is completed and submitted to the club administrator. By submitting this form the club is able to assist our families with insurance information, medical information and post injury return to play procedures. By gathering injury information the club is also able to review current safety procedures and equipment/field condition. Please fill this form out completely and send it as soon as possible after an injury to our office.

Player Name: _____

Player Grade/Age: _____

Date of Injury: _____

Coach's Name: _____

Parent Name: _____

Location/Field where the injury occurred: _____

Injury Description: _____

What caused the injury (Brief description): _____

Medical professional that attended to the injury: _____

Official Diagnosis: _____

Would you like insurance information: _____

Questions? Ian Monihan - Club administrator
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