

INJURY REPORT

SECTION 1: INFORMATION AND INSTRUCTIONS

1. Any injury sustained during a sanctioned event that required any kind of medical attention must be reported within five days of the completion of your event.
2. Attach a copy of the injured person's entry form including the waiver and release of liability signed by the participant

SECTION 2: TOURNAMENT IDENTIFICATION

Name of Event:

Date(s) of Event:

Sanction Number:

Tournament/Clinic Director:

Club Host:

SECTION 3: INJURY REPORT

Name of Participant:

Age:

Weight:

Sex:

Judo Rank:

COED MATCH (USJF ONLY)

Membership Number(s): USJI _____ USJA _____ USJF _____

Tournament Division:

Referee on Mat:

Judges on Mat:

Nature of Injury: _____

Name on Attending Medical Person:

Did Participant Continue to Compete? Yes No

Was Participant Taken to a Medical Facility? Yes No

Name of Medical Facility:

What type of treatment was given? _____

(Signed Name)

(Printed Name)

(Date)