



**Northern California Rush Soccer Club**  
35640 Fremont Blvd ·229  
Fremont, CA 94536

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**INCIDENT REPORT**

Home Club \_\_\_\_\_ vs. Visiting Club \_\_\_\_\_

Home Team \_\_\_\_\_ vs. Visiting Team \_\_\_\_\_

Game Date \_\_\_\_\_ Venue \_\_\_\_\_

Time of Incident \_\_\_\_\_ 1<sup>st</sup> Half      2<sup>nd</sup> Half      Overtime      Other

Name of Player(s) Involved \_\_\_\_\_ Player Club \_\_\_\_\_

Name of Staff(s) Involved \_\_\_\_\_ Staff Club \_\_\_\_\_

Name of Person Submitting Report \_\_\_\_\_

Person Submitting Report Phone \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date Submitted \_\_\_\_\_

***Print Legibly - Use Back of form if necessary:***

**DESCRIPTION OF INCIDENT**

**LIST ALL INJURY DETAILS INCLUDING NAME(S)**

**ACTION REQUESTED**

**NOR CAL RUSH RESPONSE**