APPENDIX G: Incident Report Form

File your Incident Reports online at http://www.ponyclub.org/?page=Incident. Or print this page and mail to: USPC Safety Committee, 4041 Iron Works Parkway, Lexington, KY 40511.

USPC INCIDENT REPORT FORM

For USPC use only
This section is to be completed by local, regional, or national official (DC/ CA/RS, Safety Officers–SO, or other designated person–DP) who should note the circumstances.

DC/CA/RS/So/DP Name________________________________________ Phone____________________________
Club/Center/Group________________________________________ Region____________________________________

Person Involved in Incident:
Name________________________________ Date of Birth__________________ Gender ____ Current Certification________
Club/Center/Other________________________________________ Region____________________________________
Parent/Guardian Name_____________________________________ Phone_____________________________
Address_________________________________________________ Email ______________________________________
City ______________________________________ State___________Zip Code________________

Incident Information:
Date of Incident________________________________ Incident involved (Check all that apply):

☐ PC Member/Rider      ☐ Parent      ☐ Volunteer
☐ Spectator            ☐ Official     ☐ PC Member Unmounted
☐ Other________________

Location of Incident ______________________________________
Address ________________________________ City/State/Zip________

Incident involved the head. ☐ Yes ☐ No 
Member showed signs of a concussion. ☐ Yes ☐ No
Member was pulled from participation. ☐ Yes ☐ No 
Member returned to participation after a break. ☐ Yes ☐ No

Individual/Parent was given a Concussion Return to Play Form to complete. ☐ Yes ☐ No

Indicate where the incident occurred:
☐ Stable       ☐ Show ring       ☐ Dressage ring       ☐ Warm up area       ☐ Cross Country Course
☐ Parking area ☐ Other: __________________________

Type of Pony Club activity:
☐ Mounted Meeting ☐ Unmounted Meeting ☐ Rally ☐ Camp
☐ Fundraiser (describe)________________________ ☐ Other (describe) _____________________________
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Discipline involved (if applicable):
- Dressage
- Eventing
- Games
- Polocrosse
- Quiz
- Show Jumping
- Tetrathlon
- Western Dressage
- Hunter Seat Equitation
- Gymkhana
- Western Trail

If the incident involved jumping:
- Show Jumping
- Cross Country
- Hunter Seat Equitation

Describe what happened:

Describe nature of injuries:

Please check if person involved:
- No injury observed
- Required no treatment, continued with activity
- Required no treatment, but declined to continue with activity
- Required treatment, returned to activity
- Required treatment, was unable to continue with activity
- Serious injury, was transported to hospital

Protective Equipment Used:
- ASTM/SEI helmet—please provide make, model, and year
- Other helmet type—please provide make, model, and year
- Protective Vest—Impact
- Inflatable
- None

If vest was used, please provide make, model and year
- Safety stirrups (Type)
- Other

Contributing factors to the accident:
- Weather (explain)
- Footing (explain)
- Distractions (give details)
- Other

Please mail or fax (859-233-4652) all incident report forms to:
USPC Safety Committee
4041 Ironworks Pkwy
Lexington, KY 40511

In the case of a very serious incident, please report to USPC Executive Director or Executive Assistant as soon as possible. 859-254-7669 or email to: executivedirector@ponyclub.org or execassistant@ponyclub.org.