

**SOUTHERN CONFERENCE LEAGUE**

**BRAWL REPORT FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Home Team:** | | | | | | | | **Away Team:** | | | | | | | | |
| **Date of Game:** | | | | | | | | | | | | | | | | |
| **Time of Brawl:** | | | | | | | | **Score at Time of Brawl:** | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **BASIC FACTS** | | | | | | | | | | | | | | | | |
|  | **Name** | | | | | | | **Shirt Number** | | | | | | | **Team** | |
| **Instigator:** |  | | | | | | |  | | | | | | |  | |
| **Retaliator:** |  | | | | | | |  | | | | | | |  | |
|  | | | | | | | | | | | | | | | | |
| **Please highlight which you consider to be the most appropriate:** | | | | | | | | | | | | | | | | |
| **Number of Players Involved:** | | | | | **3 or 4** | | | | | **4 or 5** | | | | **5 or 6** | | **7+** |
| **Number of Players Punching:** | | | | | **3 or 4** | | | | | **4 or 5** | | | | **5 or 6** | | **7+** |
| **Number of Players Running In:** | | | | | **Less than 2** | | | | | **3 or 4** | | | | **5 or 6** | | **7+** |
| **Number of Club Officials Involved:** | | | | | **0** | | | | | **1** | | | | **2** | | **3+** |
| **Number of Spectators Involved:** | | | | | **0** | | | | | **1** | | | | **2** | | **3+** |
| **Brawl Duration (seconds):** | | | | | **0-20** | | | | | **20-40** | | | | **40-60** | | **60+** |
|  | | | | | | | | | | | | | | | | |
| **Please note below injuries caused as a direct consequence of the brawl:** | | | | | | | | | | | | | | | | |
| **DVD Recording of Game:** | | **YES** | | **NO** | | | **If yes, by which club:** | | | | | | | | | |
| **Medical Aid required (local/external) :** | | | | **YES** | | | **NO** | |  | | | | | | | |
| **Was there a breach of Child Protection legislation:** | | | | | | | | | | | **YES** | **NO** | |  | | |
| **Full description of brawl (use reverse if necessary)** | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Details of a previous caution administered to any player in the brawl:** | | | | | | | | | | | | | | | | |
| **Distance from incident (metres):** | | | | | | **Possible Mistaken Identity:** | | | | | | | | | **YES** | **NO** |
|  | | | | | | | | | | | | | | | | |
| **REFEREE DETAILS** | | | | | | | | | | | | | | | | |
| **Name:** | | | **Society:** | | | | | | | | | | **Signature:** | | | |

This report must be forwarded by e-mail to [Sean.Mills@rfl.co.uk](mailto:Sean.Mills@rfl.co.uk)

for receipt within THREE WORKING DAYS of the game.