

APPENDIX I: INCIDENT REPORT FORM

File your Incident Reports online [here](#), or print this page and mail to: USPC Safety Committee, 4041 Iron Works Parkway, Lexington, Ky 40511. For the most current Incident Report form please visit the ponyclub.org website.

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/Age _____ 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. <input type="checkbox"/> Yes <input type="checkbox"/> No | Showed signs of a concussion. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Was pulled from participation. <input type="checkbox"/> Yes <input type="checkbox"/> No | Returned to participation after a break. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Individual/Parent was given a Concussion Return to Play Form to complete. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Indicate where the incident occurred:

- Stable/Barn Arena Warm up area Cross Country Course Field of Play/Open Area
 Parking area Other: _____

Type of Pony Club activity:

- Mounted Meeting Unmounted Meeting Rally Camp Certification Testing
 Fundraiser (describe) _____ Other (describe) _____

Discipline involved (if applicable):

- Dressage Eventing Games Polocrosse Quiz Show Jumping Tetrathlon
 Western dressage Hunter Seat Equitation Gymkhana Trail Other Discipline

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If the incident involved jumping:

- Show Jumping Cross Country Hunter Seat Equitation Fox Hunting

What type of fence _____ Approximate height: _____

Describe what happened in as much detail as you can provide:

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/Sel helmet—please provide make, model, and year _____
- Other helmet Type—please provide make, model, and year _____
- No Helmet worn
- Protective Vest— Impact Inflatable None Unknown

If vest was used, please provide make, model and year _____

- Safety stirrups (Type) _____
- Other _____

Contributing factors to the accident:

- Weather (explain) _____
- Unknown
- Footing (explain) _____
- Unknown
- 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.

Or fill out the incident form
online by scanning the QR code.

