

**MAJOR INCIDENT REPORT**

*This form is to be completed by the Secretary/Senior Duty Official of the Club at which the incident occurred immediately after the incident and forwarded to the RLB office within **48 hours** of the incident occurring.*

**Preliminary Information:**

Date of Incident: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time of Incident \_\_\_\_:\_\_\_\_ AM/PM

Name of Club/Ground Where Incident Occurred: \_\_\_\_\_

Name/s of Persons Involved: \_\_\_\_\_

Club &amp; Team Persons Involved/Associated With: \_\_\_\_\_

Names of Two Independent Witnesses: \_\_\_\_\_

Name/s of Host Club Duty Officials Present: \_\_\_\_\_

Name of Visiting Club Duty Official (if applicable): \_\_\_\_\_

**Brief Description of Incident: (What Occurred) – Please attach signed witness statements**

Were the Police called? Yes / No

Were there any media representatives present? \_\_\_\_\_

Name of Person Completing This Report: \_\_\_\_\_

Position Held &amp; Club: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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