



NATIONAL 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: | | | | |
| <u>Please highlight which you consider to be the most appropriate:</u> | | | | |
| 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 alan.smith@rfl.uk.com for receipt within 48 hours of the game taking place.