# SJR Sports



# Record of injuries sustained before coming to club

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| **Record completed by:**  **Job title:** | | **Name of child:** |
| **Date and time injury identified:** | | |
| *Please give a brief description of the nature of injury and the explanation given for the cause:* | | |
| **Record completed by:** *(Signature)*  **Date:** | **Record read by:** *(Signature of parent or carer)*  **Date:** | |