



Emergency Action Plan (EAP)

In this section, it is mandatory to prepare your EAP based on the facility your team will spend the majority of its time (Practice or Home game diamond) and well as the specific procedures you have put in place with your team staff &/or parents.

| Team: | | _ |
|------------------------------------|-------------------------|--------------|
| Venue/Park name: | | - |
| In the event of an EMERGENCY Call: | | |
| Address of Venue/Park: | Address: | |
| | City: | |
| Nearest Hospital: | Name: | |
| | Address: | |
| | City: | |
| | Distance to venue/park: | |
| | | |
| Emergency Contacts | Name | Phone number |
| Head Coach | | |
| Assistant Coach | | |
| Team Manager | | |
| Charge Person #1 | | |
| Call Person #1 | | |