

WarBall Emergency Action Plan

WarBall LARP / WAFL+ | Santa Rosa, California

REVIEW COPY - September 12, 2026

Complete the venue details, assign responders, and obtain facility and qualified medical review before adopting this plan. These proposed procedures do not establish that staffing, equipment, or facilities are already in place.

1 Emergency quick action sheet

STOP PLAY - CALL 911 - SEND FOR THE AED - GUIDE RESPONDERS

Any person may call an emergency stop or call 911. Do not wait for a coach, permission, a signed waiver, or a diagnosis. Stop all contact, throwing, and equipment operation. Keep bystanders back and approach only when the scene is safe.

Exact field / facility	SRJC Santa Rosa campus - Football Field
Street address / city / ZIP	1501 Mendocino Avenue, Santa Rosa, CA 95401
EMS entrance / gate / cross street	
Gate key / access holder	TO COMPLETE
Caller phone / backup phone	707 688 3312
AED location / access hours	NOT YET CONFIRMED - verify physical access before every event

What to tell 911

"We have a medical emergency at **1501 Mendocino Avenue, Santa Rosa, CA 95401**, on **[the football field]** in Santa Rosa. Enter at Mendocino Ave. There are **[X]** injured people. The person is **[responsive/unresponsive; breathing/not breathing normally]**. The problem is **[brief description]**. We are providing **[care]**. My callback number is **[number]**. Someone will meet you at the entrance."

Use speakerphone, answer the dispatcher, follow instructions, and stay connected until told to disconnect. If the assigned caller is unavailable, another person calls immediately.

For SRJC events only: District Police lists emergency and non-emergency dispatch at **707-527-1000**. Have a second person notify campus dispatch after 911 is activated; do not delay immediate care. Confirm the venue-specific campus procedure in advance. [2]

People and field readiness

2 Assign primary and backup responders

Role	Name / phone / backup - complete before each event
Event lead	Will Bagley
Medical / first-aid lead	Will Bagley - current CPR/AED and first-aid training
911 caller	Will Bagley
AED / equipment runner	TO COMPLETE - brings AED and first-aid supplies
EMS access guide	TO COMPLETE - unlocks gate and meets ambulance
Participant / spectator lead	Will Bagley clears space, accounts for group, contacts family
Weather / air-quality monitor	Will Bagley monitors conditions independently of officiating

Brief everyone on the spoken signal **"EMERGENCY - STOP PLAY"**. If staffing is reduced, assign combined duties explicitly, while ensuring that immediate care, calling 911, and AED retrieval can occur without avoidable delay.

3 Proposed minimum conditions before play

- [x] Named responders and backups present; trained CPR/AED responder available.
- [x] AED accessible, ready indicator checked, pads/battery current; retrieval route walked.
- [] Charged phones tested for reception; backup communication location identified.
- [x] EMS entrance unlocked or immediate key access available; route unobstructed.
- [x] Gloves, gauze, dressings, bleeding-control supplies, CPR barrier and scissors available.
- [x] Drinking water, shade, cooling supplies and weather shelter available.
- [x] Participant emergency contacts and relevant individual medical plans accessible privately.
- [x] Surface, weapons, helmet/visor releases, armor, straps and ball attachments inspected.
- [] Heat, smoke/AQI and official alerts checked; stop-play authority understood.

Postpone contact activity if a required condition above is missing. This is a proposed WarBall operating rule for adoption, not a claim that USA Football mandates this exact checklist.

Do a brief emergency huddle before each practice, game, demonstration or equipment trial. Ensure substitute staff and visiting participants know the stop signal and assembly location.

Medical emergency response

Provide care within current training and follow 911/AED instructions. These prompts support, but do not replace, hands-on first-aid and CPR/AED training.

4 Collapse, unresponsiveness or abnormal breathing [3]

If unresponsive and not breathing normally or only gasping: activate 911, start CPR immediately, and send another person for the AED. Turn it on, apply pads and follow its prompts; keep everyone clear when instructed. Continue CPR as directed until EMS takes over or normal signs of life return. If untrained, follow dispatcher-guided CPR. Do not dismiss a collapse as exhaustion or an ordinary game elimination.

5 Head, neck or back injury [4, 5, 6]

For suspected spinal injury, call 911 and ask the person to remain still. Do not help them stand or walk. Do not routinely remove the helmet or armor, apply a rigid collar, or put them on a backboard. Trained responders should manage equipment when required for airway access, CPR, or other lifesaving care; follow dispatcher direction. Immediate scene danger may require movement.

For possible concussion, remove the person from play immediately. No same-day return; medical clearance is required before returning to sport. Record what happened and arrange medical assessment. Call 911 for worsening headache, repeated vomiting, seizure, increasing confusion, inability to wake, slurred speech, weakness, numbness or unequal pupils. Keep the person supervised.

6 Severe bleeding, major injury or breathing crisis [6]

Call 911 for uncontrolled bleeding, serious trauma or severe breathing difficulty. For external bleeding use gloves and firm direct pressure. Trained responders may use a commercial tourniquet for life-threatening limb bleeding when appropriate. Do not remove embedded objects or attempt to straighten a deformed limb. For asthma or severe allergy, assist with the person's prescribed rescue medication according to their individual plan and your training; do not delay 911.

7 Heat emergency in armor or costume [7]

Confusion, collapse, seizure or altered behavior during heat exposure can indicate heat stroke, even when the person is sweating. Call 911 and begin rapid cooling immediately. Move to shade if safe; trained responders remove excess gear while considering possible trauma. Wet skin, apply cold wet cloths and fan; use cold-water immersion when a trained team can safely support the airway. Continue cooling while coordinating with EMS. Do not give oral fluids to someone confused or unconscious.

For milder heat symptoms, stop activity, move to a cool place, supervise and seek medical advice. An alert person able to swallow may sip water. Escalate to 911 for deterioration. Record the incident; do not simply send the player back into armor.

WarBall and environmental hazards

8 Equipment and contact incidents

After a weapon, visor, armor, rod, strap or ball-attachment incident: stop play, clear loose equipment away from the response area, and isolate the involved item for inspection. Do not pull on a trapped limb or force a jammed helmet release. Explain the actual equipment and injury mechanism to EMS. Never assume helmet lights or visor position reveal a person's medical condition.

Before use, the medical and equipment leads should rehearse access to the airway and chest using the actual gear. Record release-tool locations. Do not practice removal on an injured person.

9 Heat, lightning and smoke [7, 8, 9]

Heat: The medical lead and facility must adopt written heat limits, work/rest intervals and equipment adjustments before the season. Monitor conditions at the field, provide frequent cooling and water breaks, and shorten or cancel sessions when controls are inadequate. **Acclimatization and armor/costume heat burden must be considered.**

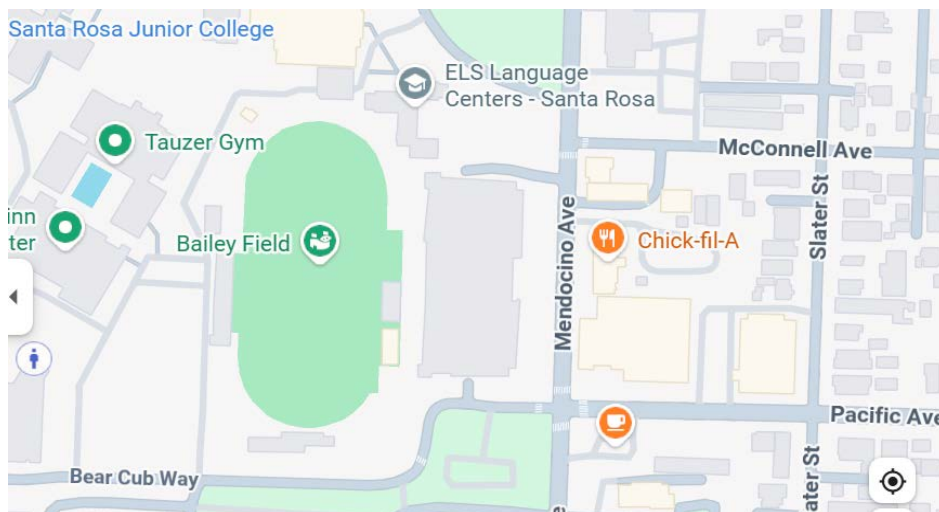
Lightning: Stop outdoor activity when thunder is heard or lightning is seen. Go to the preselected substantial enclosed building or enclosed hard-topped vehicle. Tents, dugouts and trees are not lightning shelters. Wait at least 30 minutes after the last thunder or lightning before return; restart the clock with each occurrence. [8]

Smoke / air quality: Check AirNow and local alerts before and during outdoor events. Proposed conservative WarBall policy: at AQI 101-150, reduce exertion and duration, add breaks and offer a clean-air alternative for sensitive participants; **at AQI 151 or higher, suspend outdoor WarBall.** Apply stricter facility rules. Stop earlier for symptoms, worsening smoke or official direction. These thresholds are a proposed club policy informed by AirNow, not a quoted sport-specific mandate. [9]

10 Wildfire, earthquake and other threats [10]

Monitor SoCoEmergency and enroll event leads in local alerts. **Know the venue evacuation zone.** For a fire or evacuation order, stop the event, leave by the safe route and account for participants at the designated assembly point. Do not delay for gear or send anyone back into danger.

During an earthquake, use Drop, Cover and Hold On indoors. **Outdoors, stay clear of buildings, poles, trees and overhead wires; protect your head.** After shaking, assess hazards and follow facility directions. For violence or another immediate threat, move away if safe, call 911 when safe, and follow police/facility instructions. Do not investigate or confront a threat.



Venue map and response handoff

11 Complete one sheet for each venue [1]

Facility contact / phone	TO COMPLETE
Primary EMS route and entrance	TO COMPLETE
Backup entrance / gate access	TO COMPLETE
AED and first-aid kit locations	TO COMPLETE
Cooling station / release tools	TO COMPLETE
Indoor weather shelter / capacity	TO COMPLETE
Assembly point / alternate	TO COMPLETE
Accessible evacuation assistance	TO COMPLETE - named helper and safe route
Evacuation zone / alert source	TO COMPLETE
Backup phone / radio location	TO COMPLETE

Attach a verified field map here before adoption. Mark the playing area, streets, ambulance gates, AED, equipment, shelter, accessible paths and assembly points. Walk the route with facility staff. **The SRJC safety map identifies public AEDs [11], but the nearest accessible unit for this event is not yet confirmed. Ask District Police or campus safety staff to verify its exact location, access hours and backup; then time retrieval from the field.**

12 EMS handoff and transportation

The access guide remains visible at the agreed entrance. The medical lead tells EMS the mechanism, observed symptoms, known relevant history, care given and times, including CPR, AED use or medication. Emergency transport and destination are determined by EMS. Do not send an unstable person to hospital in a private vehicle or delay care to locate a parent.

The participant lead contacts the emergency contact or guardian promptly without interrupting care. Identify an accompanying responsible adult if needed and record the destination and callback number. Keep remaining participants supervised; protect the injured person from filming and unnecessary disclosure.

Local EMS access review date	TO COMPLETE
Response-time planning information	TO VERIFY WITH LOCAL EMS - no guaranteed arrival time
Receiving emergency department	EMS determines destination; local options to verify with medical lead

Review and adoption

13 After an incident

Record date, time, location, witnesses, observable facts, actions and handoff. Preserve implicated equipment. Notify the club and facility contacts according to their reporting procedure. Store medical/contact details securely, not on a public website. Debrief responders, restock supplies, and correct the cause before resuming the affected activity. Obtain appropriate medical clearance for the injured participant.

14 Rehearse and approve [1]

Review and drill this plan at least annually and whenever the venue, gear, staff or emergency access changes. Practice a collapse/AED response, a helmet/armor access scenario and evacuation. Record actual retrieval and access times and correct delays. Distribute the completed plan to staff and keep a printed quick sheet at the field.

Plan owner / phone	Will Bagle 707 688 3312
Facility reviewer / date	TO COMPLETE
Qualified medical reviewer / date	TO COMPLETE
Club adoption / effective date	TO COMPLETE
Last drill / next review date	TO COMPLETE

Reference basis

Original WarBall adaptation using public guidance; not the enrolled USA Football template and not endorsed by USA Football. Medical prompts require review for participant ages, available training and the actual venue. Sources checked September 12, 2026.

1. [USA Football - EAP planning components](#)
2. [SRJC District Police - dispatch contact](#)
3. [American Red Cross - unresponsive person / CPR and AED](#)
4. [CDC HEADS UP - responding to concussion](#)
5. [CDC HEADS UP - danger signs](#)
6. [AHA / Red Cross - 2024 first-aid guidelines](#)
7. [CDC / NIOSH - heat-related illnesses](#)
8. [National Weather Service - lightning and outdoor sports](#)
9. [AirNow - outdoor activity guidance](#)
10. [Sonoma County - alerts and earthquake guidance](#)
11. [SRJC - campus evacuation and public AED map](#)
- 12.