Introduction and Aim: Sport injuries content features specific to sport branch. In these branches, body sections at which disability was seen is different from disability types. Sport disabilities are major factors that had athletes send away from sports environment. Athletes who moved away from this environment can lose the training adaptations as a result of detraining. Therefore, precautions decreasing the athletes’ disability prevalence should take both trainers and health stuff. The aim of this study is to investigate the disability sections and types of high-school youths that play hall football.

Method: To the study 60 (36.4%) male, 105 (63.6%) female totally 165 athletes joined to the study voluntarily whose mean of age was 16.36±1.09 years, mean of length was 166.32±7.50 cm, mean of weight was 57.31±8.35 kg. “The Nordic Musculoskeletal Questionnaire-NMQ” was used for evaluation of athletes’ disabilities. In questionnaire body was divided into nine sections as neck, shoulder, elbow, wrist, back, waist, hipfemur, knee, foot-ankle. The questionnaire provides reliable information on the prevalence and outcome of diseases in the last year. In application of questionnaire, questions were asked face to face by personal conversation technique and data were transferred to the form by a pollster. In evaluating data, statistics programme developed for social sciences was used. Results were evaluated with frequency, percentage distribution and Chi-Square test. Significance level was accepted as 0.05.

Findings: The most sections that athletes injured are in order of foot-ankle 29.1% (n=48), knee 24.2% (n=40), hand-wrist 18.1% (n=30). These injuries were seen in sections that strain (28%) in foot-ankle, bruise (52%) in knee, strain (46%) in hand-wrist. The types of injuries in these areas are usually simple injuries, so no medical treatment was required in any health facility in injuries of foot-ankle 39%, of knee 42% and of hand-wrist 33%. Again, the most serious injuries in these regions occurred in the knee region and 16% of the injuries in these regions were treated in the hospital.

Discussion and Result: The most disabilities of hall football players were seen in footankle, knee and hand-wrist sections. The presence of many injuries in the hand-wrist section indicates that the falls have become very popular in the training or competition environment. Knee injuries are usually more serious injuries. The ankle sprain is too much is caused by the fact that it is played on the hard ground of hall football. Given the disability areas and types of disability, external factors are more effective in hall football disability. For this reason it would be more beneficial for the athletes to use the materials, the field conditions and the rules of the game again to minimize the injuries.