

RFU/W INCIDENT REPORT FORM

Your Name:	Your Club:
Contact Details:	Position in Club:
Telephone No:	
Name and Contact Details of Person Making Allegation:	
Date & Time of Incident:	Where incident took place:
Type of Incident:	
Child/Young Person's Name	Age:
Parent/Carer's address:	Telephone No:
Name of adult against allegation is made:	Age:
Contact Details:	Position at Club:
Member of Club: Yes/No	
Relationship between adult (against whom the allegation has been made) and child/young person, if any:	
Details of Incident:	

Were there any witnesses? If so, please state name and contact details:

If Child/Young Person spoke to you directly, please record actual details and words used by the child. (Remember do not lead or question the child or young person.)

Action taken so far by you:

Other bodies contacted:

NSPCC/POLICE/SOCIAL SERVICES

NSPCC: 0808-800 5000

Child Protection in Sport Unit (CPSU): 0116 234 7278/7280)

Police Child Protection Unit Leicester: 0116 222 2222

Social Services Leicester: 0116 255 1606 (out of hours)

If Yes, which:

Name & Contact Details

Referred to CB Safeguarding Manager: Yes/No

Mike Flatt

Mob: 07768427711

sgmanager@leicestershirerugbyunion.co.uk

Any other information:

P.S. Remember to maintain confidentiality on a *need to know* basis – i.e. only if it will protect the child. Do not discuss this incident with anyone other than those who need to know.

Has the Club Safeguarding Officer been contacted/informed? Yes / No

NB. A copy of this form should be sent to Social Services, after the telephone report, and to the Club Safeguarding Officer, who will forward it to the CB Safeguarding Manager.