

Bure Valley Harriers Safeguarding Concern Reporting Form

Details of Person Reporting

Name		
Email Address		
Contact Phone Number		
Role (tick those which apply)	Official	Coach
	Athlete U18	Welfare Officer
	Athlete O18	Other

Details of the People Involved

Child / Adult at Risk (if known)		
Name		
Address	Street	
	Town	
	Postcode	
Contact Phone Number		
Preferred Language		
Is an interpreter required?	Yes	No
Any Additional Needs		

Parent / Guardian / Carer	
Name	
Contact Phone Number	

Suspected Perpetrator	
Name	
Relationship to the Person At Risk (eg coach / parent, guardian or carer etc)	
Address	Street
	Town
	Postcode
Contact Phone Number	
Position Held (eg coach, official, parent helper etc)	

Details of the Concerns Raised

Date of Concern	
Details of Your Concern (Summarise what happened and include, time, location, who did what etc)	
Initial Action Taken (Summarise what action has been taken by the club / welfare officer etc. in relation to the concern)	

Is the Person At Risk aware you are reporting your concern to a Club Welfare Officer?	Yes	No
Have the parents / guardian / carer been informed?	Yes	No
Who else have you informed about the concern? (Please tick any which apply)	Police	UKA
	LADO	Other
	Local Authority Services	

Other Witnesses - please include names, address and contact details