

October 2020

Safeguarding Referral Form



Information contained on this form will form part of Wilmslow Hockey Club's investigation into the alleged incident. As the person completing the form, please notify each individual whose details you include on this form that their information may be shared with a number of organisations and individuals relevant to the investigation.

Your club/organisation's name: Wilmslow Hockey Club

Your Details

First name:	Surname:
Position in club/organisation:	
Home Address:	
Postcode:	
Daytime contact number:	Evening contact number:
Email address:	

Concern

Please give a brief description of the concern (include dates, times, venue etc.)

Have you spoken to the young person(s)? Please provide details



Concern

What is the relationship between the young person and the accused?

Have you spoken to the parent/carer of the young person(s) involved?

Action taken so far:

Details of young person

First name:	Surname:
Male/Female:	
Parent/legal guardian name:	Parent/legal guardian contact number:
Home Address:	
Postcode:	

Details of accused/adult

First name:	Surname:
Date of Birth:	
Position in sport:	Contact number:
Home Address:	
Postcode:	

Details of external agencies contacted so far

Organisation	Y/N	If yes, which?	Name & Number	Date & Time	Details of advice received
England Hockey					
Police					
Children's Social Care					
Other (e.g. NSPCC)					

Signed:

Print Name:

Date:

Remember to maintain confidentiality on a need to know basis. Only disclose information if it will protect the child.
Do not discuss this incident with anyone other than those who need to know.

THIS FORM SHOULD BE RETURNED TO:

(Please mark your envelope CONFIDENTIAL)

Welfare Officer,
Wilmslow Hockey Club,
Oakwood Farm,
Styal Road
Wilmslow,
Cheshire,
SK9 4HP

or emailed to: welfare@wilmslowhockey.org.uk

