***The policies and guidelines referenced within this document are those of British Canoeing and its home nation associations.***

It is important to keep an accurate record of the information you know and who you passed it on to. Complete as much information as possible. **Continue onto a separate sheet or additional form if necessary.**

This form must be completed as soon as possible after receiving information that causes concern about the welfare or protection of a child or adult. The form must be passed to the British Canoeing (or home nation association) as soon as possible after completion; do not delay in attempting to obtain information to complete all sections.

| **PERSON(S) AGAINST WHOM ALLEGATIONS HAVE BEEN MADE** (if applicable) |
| --- |
| Full name:       | Age:      |
| Address:      Postcode:      |
| Phone numbers:      |
| Club/ Centre/ Team/ Event:      |
| Position in Club/Centre/Team/ Event/:      |

| **CHILD/ ADULT INVOLVED** (Please complete separate forms for each person involved- if more than one)  |
| --- |
| Full name:      |
| Age/ Date of birth:      | Gender:      |
| Ethnicity:      |
| Parent or carer name(s):      |
| Address:      Postcode:      |
| Phone numbers:      |
| Relationship with the Club/Centre/Team/Event:      |

| **YOUR DETAILS** |
| --- |
| Full name:      |
| Position in Club/Centre/Team/Event :      |
| Address:      Postcode:      |
| Phone numbers:      |
| **PROVIDE THE DETAILS OF THE INCIDENT OR CONCERNS THAT YOU HAVE, INCLUDING DATES, TIME AND VENUE:**      |

| **DETAIL EXACTLY WHAT WAS SAID, IF YOUR CONCERNS ARE THE RESULT OF A CHILD/ ADULT SPEAKING TO YOU, INCLUDE DATE, TIME AND VENUE:**      |
| --- |

| **HAVE YOU SPOKEN TO THE PARENTS?** YES [ ]  NO [ ] (If yes, provide details of what was said)       |
| --- |

| **HAVE YOU SPOKEN TO THE CHILD/ ADULT?** YES [ ]  NO [ ] (If yes, provide details of what was said)       |
| --- |

| **HAVE YOU SPOKEN TO THE PERSON THE ALLEGATIONS ARE BEING MADE AGAINST?** YES [ ]  NO [ ] (If yes, provide details of what was said)       |
| --- |

| **PROVIDE DETAILS OF FURTHER ACTION TAKEN TO DATE:**      |
| --- |

| **HAVE YOU INFORMED THE STATUTORY AGENCIES?**  Name of person you spoke to: Incident Number:Police YES [ ]  NO [ ]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_Children’s Social Care YES [ ]  NO [ ]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_Adult Social Care YES [ ]  NO [ ]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ |
| --- |

| **PROVIDE THE NAME OF THE PERSON YOU HAVE SPOKEN TO AND THEIR CONTACT DETAILS:**      |
| --- |

| **WERE THERE ANY WITNESSES TO THE INCIDENT OR CAUSE FOR CONCERN?** YES [ ]  NO [ ] (If yes, provide their name, role, relationship (if any) to the child or others involved and contact details)      |
| --- |

PRINT NAME:

SIGNATURE:

DATE/ TIME:

Please return this form via email or in an envelope marked **PRIVATE and CONFIDENTIAL** to:

**England:** Nancy Squires, British Canoeing, National Water Sports Centre, Adbolton Lane, Holme Pierrepont, Nottingham, NG12 2LU or email safeguarding@britishcanoeing.org.uk

**Northern Ireland:** Stephen Craig, Child Safeguarding Lead, The Canoe Association of Northern Ireland, Belfast Boat Club, 12 Lockview Road, Belfast, BT9 5FJ or email childprotection@cani.org.uk

**Scotland:** Andy Murray, Lead Child Protection Officer, Caledonia House, 1 Redheughs Rigg, South Gyle, Edinburgh, EH12 9DQ or email child.protection@canoescotland.org

**Wales:** Nigel Midgley, Canoe Wales Child Protection Officer, Canolfan Tryweryn, Frongoch, Bala, Gwynedd, LL23 7NU or email nigel.midgley@canoewales.com