



Incident Child Safety Record Form.

Roskill Swimming Club
SAFEGUARDING CHILDREN
INCIDENT RECORD FORM

Club or Agency: Roskill Swimming Club
Your Name:
Your Position:
Child's Name
Child's Address:
Parents/Carers Name and Address:
Child's Date of Birth:
Date and Time of any Incident:
Your Observations:
Exactly What the Child Said and What You Said (Remember, do not lead the child – record actual details. Continue on separate sheet if necessary)
Action Taken so far:

External Agencies Contacted (Date & Time)	
POLICE Yes/No	If yes – which: Name and Contact Number: Details of Advice Received:
Local Authorities Children’s Social Care Yes/No	If yes – which: Name and Contact Number : Details of Advice Received:
SPORT GOVERNING BODY - ASA Yes/No	Name and Contact Number: Details of Advice Received:
Other	Which: Name and Contact Number: Details of Advice Received:
Signature: Print Name:	
Date:	

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