

# SAFEGUARDING FORM TEMPLATE



Name:	Home Address:
Date:	
Parish:	Post Code:
D.O.B:	Telephone number:

**Details of incident:** (Date & time, when it happened, where it happened, how it happened)

**Details of injury and first aid administered:** (specifics of where, and what was used if anything)

<b>Details of witnesses if any:</b>	Home Address:
Name:	
Date:	Post Code:
Role:	Telephone number:

<b>Details of person filling out form:</b>	Home Address:
Name:	
Date:	Post Code:
Role:	Telephone number:

**Plan of action moving forward:**

Signed by Youth Group Leader:	Parent/Guardian informed?
NAME:	<b>Yes / No</b>
Signature:	Date: