

## WRU- INCIDENT RECORD FORM PRIVATE & CONFIDENTIAL

<b>Your Name:</b>	<b>Your Position:</b>
<b>Club:</b>	<b>Contact Number:</b>

<b>Child's Name:</b>	<b>D.O.B</b>	<b>Sex: M -F</b>
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<b>Child's Address:</b>	<b>Parents/Carers Address:</b>

<b>Disability (if applicable):</b>
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<b><u>Time &amp; Date of Incident:</u></b>
<b><u>Location:</u></b>
<b><u>Details of Incident:</u></b>

<b><u>Action taken so far:</u></b>

<b>WRU CP Advised</b>	<b>Yes</b>	<b>No</b>	<b>Date &amp; Time:</b>
<b>07738 311 366</b>			

<b>Alleged Offender:</b>	<b>Position in Sport:</b>
<b>Marital Status:</b>	<b>Age:</b>
<b>Relationship between alleged offender &amp; child:</b>	
<b>Address:</b>	

**External Agencies Contacted**

<b>Name:</b>	<b>Date:</b>	<b>Contact:</b>

**N.B A copy of this form should be sent or emailed to the WRU Child Protection Unit**

**Remember to maintain confidentiality on a need to know basis only and do not discuss this incident with anyone other than those who need to know.**

**Form Completed By**

<b>Signature:</b>	<b>Print Name:</b>
<b>Date:</b>	

**WRU Child Protection Unit Line: 029 2082 2455**  
**24 Hour mobile 07738 311 366**  
**Email: childprotection@wru.co.uk**