

RUGBY FOOTBALL UNION MATCH OFFICIAL ABUSE REPORT

**LEVEL 5 &
BELOW ONLY**

TO BE COMPLETED AND RETURNED TO YOUR SOCIETY

Person(s) responsible for abuse:	Click here to enter text.
Club (if known):	Click here to enter text.

Please indicate: Player Coach Club official Spectator

Fixture:

Home team	Click here to enter text.	Team	Select
Away team	Click here to enter text.	Team	Select

Date of incident:	Click here to enter a date.	Match venue:	Click here to enter text.
Was a match video made?	Select	Competition title:	Click here to enter text.

Officials	Name	Email Address	Telephone	Society
Referee	Click here to enter text.	Click here to enter text.	Enter tel.	Enter text.
A/R 1	Click here to enter text.	Click here to enter text.	Enter tel.	Enter text.
A/R 2	Click here to enter text.	Click here to enter text.	Enter tel.	Enter text.

List names and club of any witnesses to the incident who may be prepared to submit a statement and give evidence at any hearing if required:

Click here to enter text.

Nature of abuse: Physical Verbal Other (Please indicate):

Click here to enter text.

Detailed report of incident (continue on next page if necessary):

Click here to enter text.

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Detailed report of incident continued:

Click here to enter text.

Signature of Referee (IN ALL CASES – DIGITAL SIGNATURE ACCEPTABLE)	Click here to enter Referee signature	Date	Click here to enter a date
Signature of Asst. Referee (WHERE APPLICABLE)	Click here to enter A/R signature	Date	Click here to enter a date