## HARROGATE TOWN FOOTBALL CLUB & COMMUNITY ACCIDENT & INCIDENT NOTIFICATION FORM

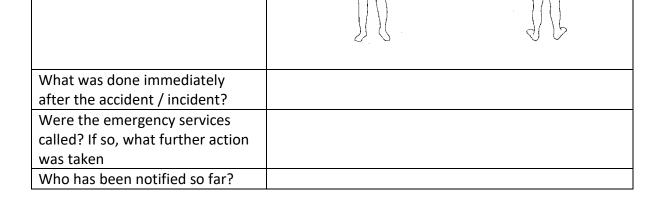
All accident and incident notification forms must be submitted within <u>24 hours.</u>
In the event of **ANY** accident, incident, or Safeguarding Child/Adult issue, please contact your line manager as soon as it is safe to do so in line with the Incident Escalation Process.

INDIVIDUAL AFFECTED BY THE INCIDENT

against a professional

Full Name							
Classification of person			Pa	rticipant $\square$	Staff [	☐ Volunteer ☐	
involved/affected/injured by incident/accident.			Ot	her:			
Date of Birth and age of individual							
Gender & Ethnicity							
Address & Postcode							
Incident Category Please choose the relevant category and type of issue your concern is about.							
Accident	Break	Epi Pen / Asthma			Fall / Trip		Sprain /Strain
	Graze	Hit by Objec		ct	Near Miss		Nosebleed
Safety and Wellbeing	Behaviour	Bullying or Cyber Bullyir			General Wellbeing		Domestic Violence
	Medical Issues	Home Issue		S	Female Genital Mutilation (FGM)		Child Sexual Exploitation
	Educational Needs	Mental Heal		th	Ratio Breach		Soiling
Incident	Discriminatory Incident	Travel			Criminal Activity i.e., Drugs or Weapons		Verbal Aggression or Violence
	Other:						
Complaint	Member of Staff Play		er/Participant		Supporter/Member of the Public		
Allegation							

COACHING INFORMATION					
Programme Name:					
(PDC/ Academy, Afterschool Club)					
Date and time of incident:					
Other Staff/Partners Present:					
Programme Manager					
DESCRIPTION OF INCIDENT (PLEAS	E USE THE CONTINUATION SHEET IF NECESSARY)				
Describe the incident / accident.	Please handwrite in capital letters and report factual				
NB: If information is unknown it is	information rather than assumption or interpretation.				
still crucial that you share the	Where an opinion is given this should be clearly stated.				
information that you do have.					
Outline any immediate action					
taken as a result of any injuries					
and the details of any first aid					
given (if applicable)					
Who was the information					
formally referred to?					
Tormany referred to:					
Does the child/young					
person/adult know that a referral					
is being made?					
Note: Do not inform					
parent/carer if there is any					
suspin of their					
involvement.					
If relevant, please indicate where					
upon the body the injury					
occurred:					
İ					



## HARROGATE TOWN FOOTBALL CLUB Report Your Concerns Form

Your Deta	ils
Name	
Contact	
People Inv	volved
Children	
Adult (s)	
When the	situation took place
Date	
Time	
Location	
Team	
Please de	scribe below, the situation about which you have concerns