**The Gaelic Games Council of Britain (GGCB) Incident reporting form**

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| Your name: | Name of organisation: The Gaelic Games Council of Britain |
| Your role: |  |
| Contact information (you):  Address:  Postcode:  Telephone numbers:  Email address: | |
| Child’s name | Child’s date of birth |
| Child’s ethnic origin | Does child have a disability |
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|  |  |
| Child’s gender: □ Male □ Female | |
| Parent’s / carer’s name(s) | |
| Contact information (parents/carers):  Address:  Postcode:  Telephone numbers:  Email address: | |
| Have parent’s / carer’s been notify of this incident? □ Yes □ No  If YES please provide details of what was said/action agreed: | |
| Are you reporting your own concerns or responding to concerns raised by someone else:  □ Responding to my own concerns  □ Responding to concerns raised by someone else | |
| If responding to concerns raised by someone else:  Please provide further information below | |
| Name:  Position within the sport or relationship to the child:  Telephone numbers:  Email address: | |
| Date and times of incident: | |
| Details of the incident or concerns:  Include other relevant information, such as description of any injuries and whether you are recording this incident as fact, opinion or hearsay | |
| Child’s account of the incident: | |
| Please provide any witness accounts of the incident: | |
| Please provide details of any witnesses to the incident:  Name:  Position within the club or relationship to the child:  Date of birth (if child):  Address:  Postcode:  Telephone number:  Email address: | |
| Please provide details of any person involved in this incident or alleged to have caused the incident / injury:  Name:  Position within the club or relationship to the child:  Date of birth (if child):  Address: Postcode:  Telephone number:  Email address: | |
| Please provide details of action taken to date: | |
| Has the incident been reported to any external agencies?  □ Yes □ No | |
| If YES please provide further details: | |
| Name of organisation / agency:  Contact person:  Telephone numbers:  Email address:  Agreed action or advice given: | |

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| Your Signature: | Date: |
| Print name: |  |

Contact your organisation’s Designated Officer in line with The Gaelic Games Provincial Council of Britain’s reporting procedures.