# **RLSS UK Witness Report Form**

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| **Your details** |  |
| **First Name**  |       |
| **Surname** |       |
| **Position in the Club** |       |
| **Home address****Postcode** |       |
| **Telephone number** |       |
| **Incident details** |
| **Date Incident** |  | **Time of Incident** |       |
| **Please provide details of the incident (what was observed) or your concerns you have, including dates, time and venue** |       |
| **Please detail exactly what was said, if your concerns are the result of a child speaking to you, include date, time and venue** |       |
| **Have you spoken to the parent/guardian/carer?** | Yes [ ]  No [ ] **If yes please provide details of what was said:**      |
| **Have you spoken to the child/young person/adult at risk?** | **Yes** **[ ]  No** **[ ]** **If yes please provide details of what was said**      |
| **Have you spoken to the person the allegations are being made against?** | **Yes** **[ ]  No** **[ ]** **If yes please provide details of what was said**      |
| **Signature and Name** |       |
| **Date** |  | **Time** |       |