# **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** |  | |