



Incident Reporting Form

This form must be completed and submitted within 2 working days of the incident.
Contact Kyushin Ryu Ju Jitsu Association's Designated Safeguarding Lead in line with the organisation's reporting procedures.

Name of person reported to	
Date reported	

Your information			
Name			
Address			
Contact number(s)			
Email			
Name of organisation		Your role	

Personal information – child / young person					
Name				Date of birth	
Gender ⁱ	Male ☐	Female ☐	Non-binary ☐	Prefer not to say ☐	Another description (please state) ☐
Is there any information about the child that would be useful to consider?					

Contact information – parent / carer		
Name(s)		
Address		
Contact number(s)		
Email		
Have they been notified of this incident?	No ☐	Please explain why this decision has been taken
	Yes ☐	Please give details of what was said / actions agreed

Incident details*			
Date and time of incident			
Please tick one:	☐ I am reporting my own concerns.	☐ I am responding to concerns raised by someone else – please fill in their details:	
Name of person raising concern		Role within the sport/activity or relationship to the child	
Contact number(s)			
Email			
Details of the incident or concerns (Include information such as times, dates, description of any injuries and if any other parties were involved, and whether you are recording this incident as fact, opinion or hearsay. Also include any other relevant information known about the family's/child's circumstances.) 			
Child's account of the incident			
Please provide any witness accounts of the incident			
Name of witness (and date of birth, if a child)		Role within the sport/activity or relationship to the child	
Address			
Contact number(s)			
Email			
Details of any person involved in this incident or alleged to have caused the incident / injury			
Name (and date of birth, if a child)		Role within the sport/activity or relationship to the child	
Address			
Contact number(s)			
Email			
Please provide details of action taken to date			

* Attach a separate sheet if more space is required (e.g. multiple witnesses)

Incident details (continued)		
Has the incident been reported to any external agencies? (e.g. police, LADO, social services, NSPCC, etc)	☐ No	☐ Yes – please provide further details:
Name of organisation / agency		
Contact person		
Contact number(s)		
Email		
Agreed action or advice given		

Declaration	
Your signature	
Print name	
Today's date	
