

Date concern raised:

Name

Reporting a Concern Form

To be used in connection with recording concerns about a child or adult that involves physical/sexual/emotional/financial abuse, bullying, neglect or discrimination. **If someone is in immediate danger, call the police on 999.**

Please complete the form (electronically or print and use black ink) within 24 hours and return either to the Club's Welfare Officer, Dawn Ellis (welfarebraidtc@gmail.com) or if the Club's welfare Officer is unavailable to the Safe and Inclusive Tennis Team at safeandinclusive@lta.org.uk within 48 hours of the concern.

Today's date:

	Your details	Welfare Officer / Referee (if different)
Name		
Name of venue		
based at		
Role at venue (if applicable)		
Contact details (including address)		

Date of				
birth (if				
known)				
_				
Name of				
venue				
based at				
Role at				
venue (if				
applicable)				
Contact				
details				
(including				
address)				
la tha Walfa			m2 (mlagge delete)	
is the weira	re Officer/Referee	e aware of the concer	n ? (piease delete)	
Yes	No			
Section 2)	Details of the co	ncern		
What happe	ned?			
Please include) <i>:</i>			
14//				
WhenWhere				
	old you about the			
conce	-			
	was involved			
	isible injuries?			
7 0.19 0.1	ololo injulico.			
Additional c	ammonto			
Auditional C	omments			
Is there any	other information	which you think is relev	ant to the concern?	
I is there ally t	Julioi iililoittialiott, V	windi you ullik is lelev		

ction 3) Details of the pa relevant)	rent or carer of the person	n you are concerned	about (if
Name(s)			
Contact details (including address)			
Have they been informed of the concern? (please delete)	Yes No		
The parent/carer should not be informed if doing so would put the child/adult at risk of harm			
ction 4) Actions taken Who has been informed abou	of the concern? (e.g. Chi	dren's Services, Pol	Date informed

Wł	nat else has been done
ab	out the concern (if
an	ything)?
-	. <u> </u>