



GREATER MANCHESTER COMMUNITY BASKETBALL SAFEGUARDING REFERRAL FORM

Details of the person reporting the incident:

Name:	
Club and position:	
Contact telephone number(s):	

Details of child:

Name:	
Basketball Club:	
Address:	
Parents address (if different):	
Date of birth:	
Ethnicity and Disability (if known):	

Date and time of any incident:	
Your observations:	
Exactly what the child said:	

Action taken so far and what you have done to reduce the risk of reoccurrence:	
Name & contact details of any witness(es):	

Have you?

- Reassured the young person
- Been honest and not made promises you cannot keep
- Explained why you may have to tell other people in order to stop what's happening
- Avoided closed questions and asked as few a questions as possible
- Encouraged the child to use their own words

PLEASE NOTIFY AND SEND THIS REFERRAL AS SOON AS POSSIBLE TO THE CLUB CHILD PROTECTION OFFICER, THE CEO AND LEAD WELFARE OFFICER.

YOU WILL BE ADVISED OF ANY FURTHER ACTIONS NEEDED FOLLOWING A CONVERSATION WITH ONE OF THESE PARTIES.

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Phil Gordos, CEO, GMCB
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