



Affiliated Football Referral Form

Date of Referral: _____

County FA(s): _____

Participant's details *(This is the person you are referring to The FA)*

Participant name		Relationship to victim/s	
Address		Tel Number	
		Email	
		Role in football <i>(Is the post paid?)</i>	
Postcode		Club or organisation	
Date of Birth		FAN	
Gender		Ethnicity	

Referrer's details *(Please enter your details)*

Name of referrer		FAN number <i>(if relevant)</i>	
Address		Role / Organisation	
		Tel Number	
		Email	
Postcode		Relationship to participant	

Child or Vulnerable Adult's details *(The child/ren or vulnerable adult/s who are at risk of harm)*

Details of alleged victim/s (age) <i>e.g. Joe Bloggs (12 years), Wembley FC U13 girls team (Please include name, age, club, parent's details an any other relevant info)</i>		FAN <i>(if relevant)</i>	
		Gender	
		Ethnicity	
		Parent/carer name	
		Contact details <i>(telephone number, email, etc)</i>	
		County FA	

Professional network *(Please provide name, contact number and email. Kindly provide the advice received and contact date with agency)*

LADO <i>(Name, telephone number and email address)</i>	
Social Services	
Police	
Other <i>(e.g. NSPCC, Club Designated Safeguarding Officer, etc)</i>	

Details of concerns

Type of abuse

(Please tick as appropriate)

Sexual abuse

Emotional abuse

Physical abuse

Neglect

Bullying

Other (Please specify):

Incident/s details

Please summarise the incident, including details of any other relevant parties.

Clearly identify a list of your safeguarding concern/s

Do you think this referral relates to:

High level Poor practice

Possible or actual risk of harm to children

For information only

Not sure

Action taken

Please specify if you referred to a statutory agency, the County FA, the Club Designated Safeguarding Officer or any other action taken related to your concerns (including action taken by the Club).

Other relevant information

Further information

Please include any information that you think is relevant to our investigation

Can the FA contact the victim or their parent/s directly?

For FA use only

Date received by FA: _____

Case Accepted: Yes / No