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**HTJFC - Incident report form**

Hungerford Town Juniors Football Club are committed to supporting your journey in football and to safeguard our existing teams.

On the occasion where you observe, or are involved in an incident, we will investigate and respond appropriately. This form is to be used by club officials, spectators and participants, for reportable incidents that need to be brought o the clubs attention. Please complete and return this form within 48 hours of the incident. Referees should continue to report via The Whole Game System.

This form should not be circulated to leagues, clubs or individuals. Please return the completed form to our Secretary and Safeguarding Team ([HTJFCSecretary@outlook.com](mailto:HTJFCSecretary@outlook.com) & [SafeguardingHTJFC@gmail.com](mailto:SafeguardingHTJFC@gmail.com))

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| --- | --- | --- |
| **Match Details** | | |
| Fixture  *Please include the name of both clubs and the specific team names e.g. Reds, Kites, Hawks, etc)* | | Age Group: |
| Date | Venue | |
| League | Referee | |

|  |  |
| --- | --- |
| **Reporter Details** | |
| Name | FAN |
| Role with club | Role at match |
| Phone | Email |
| Did you witness the incident? Yes  No | Date of report |

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| --- | --- |
| **Individual being reported** | |
| Name (if known) | Role |
| Physical Description | |

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| --- | --- | --- |
| **Nature of incident (Please select all that apply)** | | |
| Threatening or aggressive | Discrimination | Aggressive play/coaching |
| physical behaviour | (language or behaviour) | (including Respect complaints) |
| Threatening or offensive | Refereeing | Poor spectator behaviour |
| Language | (e.g. referee performance) | (including breach of Respect campaign |
| Others (please specify): |  |  |

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| --- | --- |
| **Police Involvement** | |
| Yes Crime Reference Number | |
| No | Investigating Officer  Contact Number |
| Not Sure |



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| **Summary of incident** |
| *Please provide your statement in a chronological order and confirm the time(s), date(s), location(s) and your distance from any incident(s) that you may have witnessed. For each incident please confirm if your view was unobstructed, or impaired. Please provide a detailed physical*  *description of the offender(s) (including, approx. age, height, build, hair / skin colour and any distinguishing features). Please record any offensive language that you heard directly in speech marks (“ “). 2500 characters max* |
|  |

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| --- | --- |
| **Participant/Witness Contact Details**  *For individuals under the age of 18, please provide parent/guardian contact details* | |
| Name | FAN (if known) |
| Role with club | Role at match |
| Phone | Email |
| Are they aware of your report? Yes  No | Can we contact them? Yes  No |

**Safeguarding Matters:**

For assistance on urgent child protection matters within football please email [Safeguarding@TheFA.com](mailto:Safeguarding@TheFA.com) or contact the NSPCC helpline on 0808 800 5000, or dial 999 for police assistance.

If you require advice or guidance on a potential safeguarding issue, please contact our Designated Safeguarding Officer (DSO) [safeguarding@berks-bucksfa.com](mailto:safeguarding@berks-bucksfa.com)

# Please note:

In order to take action on a complaint we will require to provide the individual or team with all evidence relating to the imcident. All contact details will be redacted, however your name and statement will be shared.

Please tick to confirm you are happy for this complaint form to be shared if required:

Date:

Signed:

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