**Incident Report Form**

**Durham County Ladies Golf Association**

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To be forwarded to the County Welfare Officer

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| Recorder’s Name: | | |
| Address: | | |
| Post Code: | Telephone No: | |
|  | | |
| Child’s Name: | | |
| Address: | | |
| Post Code: | Telephone No: | |
|  | | |
| Complainant’s Name: | | |
| Address: | | |
| Post Code: | | Telephone No: |
|  | | |
| Details of the allegations: [include: date; time; location; and nature of the incident.] | | |
| Additional information: [include: witnesses; corroborative statements; etc.] | | |
| England Golf Compliance department notified (01526 351824)  Case Number (if allocated) | | |
| Date: Time: | | |
| Action taken: | | |
| Date: Time: | | |
| Signature of Recorder:  Signature of Complainant: | | |