

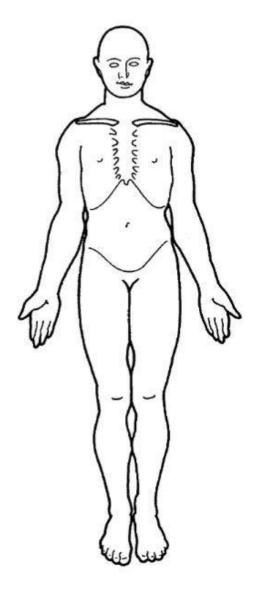
Worcestershire Youth Sailing Association

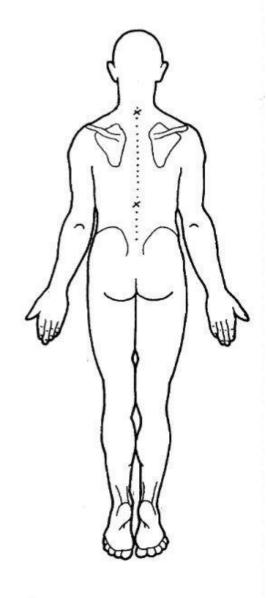
2024 REPORT OF CONCERN FOR A YOUNG PERSON

Young Person's Nar	ne:	Age:						
Parent(s)' Names: (if applicable)								
Address:								
	Time:							
Is the following info	rmation (tick as appropriate):							
	wn observation? g of someone else's concern							
Describe in detail th	ne nature of your concerns including							

ly as possible:
: e) ?
te)?
_ _

Has the parent of the young person given any explanation	ons for your concern	is?
Who have you passed this information to?		
	 	
Please note this record must be submitted to the WYSA the WYSA Deputy Safeguarding Officer. This informati discussed with anyone else.		
Your Signature:		
Your Name (capitals):	Date: _	
Action undertaken by WYSA Safeguarding Officer of Safeguarding Officer.	or if not available,	the WYSA Deputy
Has the Children's Social Care Access Centre been inform	ed?	☐ Yes ☐ No
By Whom:	Position:	
Signature:	Date:	
WYSA Chair or other WYSA Authorised Person:		
Signature:	Date:	

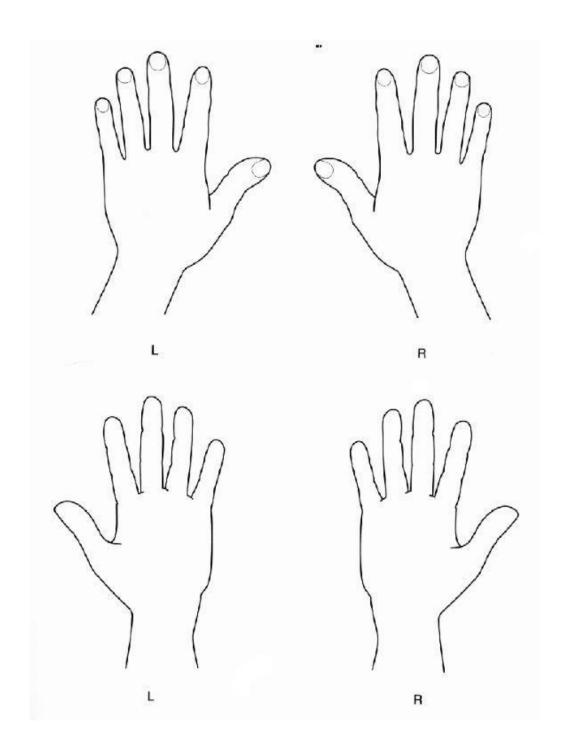




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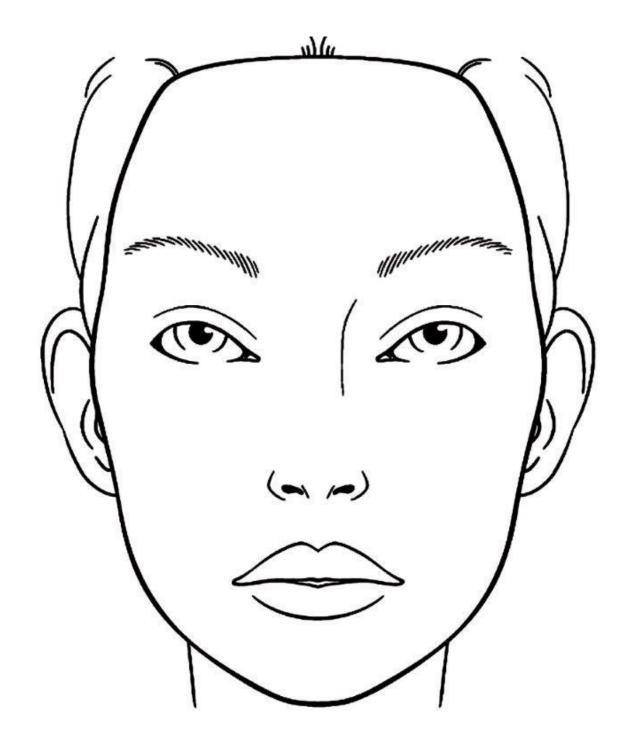
Indicate above the location of any noticeable injuries; please include a description of injury, ie burn, cut, bruise and the severity of the injury. Remember, it is not your job to investigate or to decide if any injury or mark is non-accidental.

njury Observations: (please write below or on reverse):					



Indicate above the location of any noticeable injuries; please include a description of injury, ie burn, cut, bruise and the severity of the injury. Remember, it is not your job to investigate or to decide if any injury or mark is non-accidental.

jury Observations: (please write below or on reverse):						



Indicate above the location of any noticeable injuries; please include a description of injury, ie burn, cut, bruise and the severity of the injury.

Remember, it is not your job to investigate or to decide if any injury or mark is non-accidental.

jury Observations: (please write below or on reverse):						

Information given on this WYSA Safeguarding Report of Concern Form will only be seen by WYSA Safeguarding Officers and will be stored in a secure place. Information will only be shared as detailed in the WYSA Safeguarding Policy.