

IN CONFIDENCE WHEN COMPLETED

**British Model Flying Association**

**INCIDENT RECORD FORM**

Your Name:

Your BMFA No (if applicable):

Your Address and Tel No:

Your Position/Club:

Child's/Vulnerable Adult's Name:

Child's/Vulnerable Adult's Race:  
Special Needs (if any):

Ethnic Origin:

Child's/Vulnerable Adult's Address:

Child's/Vulnerable Adult's DOB:

Parents'/Carers' Names and Address:

Date and Time of Incident:

Your Observations:

Exactly what the child/vulnerable adult said and what you said (Remember, do not lead the person – record actual details. Continue on a separate sheet if necessary):

Action taken so far:

External agencies contacted (date and time):

If yes – which:

Name and contact number:

Police: yes/no (Delete as appropriate)

Details of advice received:

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If yes – which:

Name and contact number:

Social services: yes/no (Delete as appropriate)

Details of advice received:

If yes – which:

Name and contact number:

BMFA: yes/no (Delete as appropriate)

Details of advice received:

If yes – which:

Name and contact number:

Local Authority: yes/no (Delete as appropriate)

Details of advice received:

If yes – which:

Name and contact number:

Other (e.g. NSPCC): yes/no (Delete as appropriate)

Details of advice received:

Signature:

Print Name:

Date:

**NB: A copy of this form should be sent to the relevant agency after the initial telephone report. Remember to maintain confidentiality on a *need to know basis* – only if it will protect the child/vulnerable adult. Do not discuss this incident with anyone other than those who need to know.**