



Section 5: Templates, Forms and Checklists

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ASA Child Safeguarding Policy Statement

The _____ organisation (club/squad/school) is committed to providing an environment in which all children and young people participating in its activities have a safe and positive experience.

In order to achieve this, the organisation agrees to:

1. Adopt and implement the policies and procedures in Wavepower in full.
2. Recognise that all children participating in the _____ organisation (regardless of age, gender, race, religion, sexual orientation, ability or disability) have a right to enjoy their involvement in aquatics in a safe environment and be protected from harm.
3. Ensure that all individuals who work with children in the _____ organisation, whether paid or voluntary, provide a positive, safe and enjoyable experience for children.
4. Appoint a welfare officer with the necessary skills and training as outlined by the ASA who will take the lead in dealing with all child safeguarding matters raised within the organisation.
5. Ensure that the welfare officer's name and contact details are known to all staff, members and parents of members.
6. Ensure the welfare officer is available to discuss issues of concern on matters of safeguarding and deal with such concerns appropriately and in line with Wavepower.
7. Ensure that all individuals who work with children in the _____ organisation have undertaken the appropriate training, have had the relevant DBS checks, and adhere to the required practices for safeguarding children as outlined in Wavepower.
8. Ensure that all individuals who will be working or will work with children in the _____ organisation have been recruited in accordance with the ASA Safe Recruitment Policy.
9. Ensure that all individuals who work with children in the organisation have the appropriate training, code of conduct and good practice to follow in line with the guidance in Wavepower.
10. Provide all members of the organisation and parents of members with the opportunity to raise concerns in a safe and confidential manner if they have a concern about a child's welfare.
11. Ensure that all child safeguarding matters, whether they be concerns about child welfare or protection, are dealt with appropriately in accordance with the guidance for reporting and action in Wavepower.
12. Ensure that confidentiality is maintained appropriately and in line with the best interests of the child.
13. Ensure all papers relating to child safeguarding matters are held in a safe and secure manner.

The ASA Referral Form

Date: _____

Name of Organisation: _____

Section 1 – Details of referrer (your details)

Name: _____

Position in Organisation: _____

Address: _____

Phone number(s): _____ E-mail: _____

Section 2 – Details of child concerned

Name: _____ Age: _____

Gender: _____ Date of Birth: _____

Ethnic Origin: _____

Disability/Special Needs: _____ Yes/No _____

If yes, give detail: _____

Parents/Carers: _____

Address: _____

Phone Number(s): _____ E-mail: _____

Section 3 – Details of adult/child against whom the allegation is made

Name: _____

Position in the organisation: _____

Address: _____

Phone Number(s): _____ E-mail: _____



Section 4 – The incident/concern

Date of incident: _____

Place of incident: _____

Did you observe the incident/concern: Yes/ No

If no, give details of the person who did

Name: _____

Position in Organisation: _____

Contact Details: _____

Details of concern (include as many details as possible including time it happened, place, if any injuries were sustained, treatment required). Continue on separate sheet if necessary.

Child's account of what happened (please state what the child actually said or indicate if not their exact words). Continue on separate sheet if necessary.

For ASA Office use only

Category of referral: (delete as appropriate)

Sexual Bullying Physical Other



Section 5 – Action taken by the organisation

Police informed: Yes/No

If yes, give name of the police officer dealing: _____

Phone/e-mail contact details: _____

Children’s Services informed: Yes/No

If yes name of social worker dealing: _____

Phone/e-mail contact details: _____

Medical assistance required: Yes/No

If yes, give details: _____

Parents informed Yes/No

Details of action taken (or attach report sheet seperately).

Signed: _____ Date: _____



ASA Reference Form

Applicant's name	
Applicant's address	
Applicant's Date of birth	
How long have you known this person?	
In what capacity?	
In your opinion is this person suitable to work with children and young people?	Yes/No (please delete as appropriate)
If no, please can you say why?	
Please could you comment on their skills?	
Their ability to work, and form appropriate relationships with children?	

Can you comment on the following as poor, good or excellent?

In your opinion, to what extent is the applicant's:	Poor	Good	Excellent
Ability to stay calm with children and young people			
Ability to motivate children?			
Coaching skills?			
Administrative skills?			
Trustworthiness?			
Reliability?			
Honesty?			
Any other comments?			

Please complete your details below.

Name	
Address	
Are you currently involved in swimming and if so, in what capacity?	
Phone Number(s)	
Signed	
Date	



Application Form

For members under 16 years of age

Applicant's Details

Surname: _____

First Name(s): _____

Date of Birth: _____

Address: _____

Parents' Details

Mother _____ Father _____

Surname: _____ Surname: _____

First Name(s): _____ First Name(s): _____

Address (If different from above): _____ Address (If different from above): _____

Contact Details

Phone Number: _____ Phone Number: _____

Mobile Number: _____ Mobile Number: _____

Please also complete the following forms attached

1. Medical information form
2. Photography consent or refusal of consent form
3. The members' Code of Conduct
4. Parent's Code of Conduct

Signed: _____ Date: _____

Please return the form to: _____

Medical Information Form

To be completed by members aged 18 years or over, or by parents/carers of members under 18 years. Please delete 'Yes' or 'No' as appropriate and complete further details as necessary.

Name of member	Date of birth

The Equality Act 2010 defines a disabled person as anyone with a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on his or her ability to carry out normal daily activities.

Do you consider this child to have an impairment? Yes No

If yes, what is the nature of their disability?

- Visual impairment
 Learning disability
 Hearing impairment
 Physical disability
 Multiple disability
 Other (please specify)

Medical information

Please detail below any important medical information that our organisation needs to know. Such as allergies, medical conditions e.g. asthma, epilepsy, orthopaedic problems, any current medication, special dietary requirements and/or any injuries.

Name of child's doctor and surgery

Doctor's phone number

I understand that, in compliance with the Data Protection Act 1998, all efforts will be made to ensure that this information is accurate, kept up to date and secure and that it is used only in connection with the purpose and activities of the organisation. Information will not be kept once a person is no longer a member of the organisation. The information will be disclosed only to those members of the organisation for whom it is appropriate and relevant officers of the Amateur Swimming Association or British Swimming.



Signed (Member) _____ Date: _____

Signature of Parent/Carer (if member is under 18 years) _____

For parents/carers of members under 18 years

It may be essential at some time for the coach or team manager accompanying your son/daughter to have the necessary authority to obtain any urgent treatment which may be required whilst at a competition or event with _____. Would you therefore please complete the details on this form and sign below to give your consent.

I, _____ being the parent/carer of the above named child hereby give permission for the coach or team manager to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signature of consent by parent/carer: _____

Print full name: _____

Date: _____

Please return this form to: _____

Child Photography Parental Consent Form

Note: this form must be read and completed after reading the ASA/ _____
(name of organisation) Photography Guidance.

The _____ organisation may wish to take photographs of individual and/
or groups of members under the age of 18 that may include your child during their membership of the
organisation. All photographs will be taken and published in line with the ASA Photography Guidance. The
_____ organisation requires parental consent to take and use all photographs.

Parents have a right to refuse agreement to their child being photographed.

As the parent or carer of _____ please complete the form below in respect
of your child or children. Please note you can withdraw your consent in writing to the welfare officer at
any time should you wish to.

- | | |
|---|--------------------------------|
| <input type="checkbox"/> Take photographs to use on the organisation's secure website: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to use on the club's social networking sites: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to include with newspaper articles: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to use on the organisation's notice boards: | Consent given/Consent refused* |
| <input type="checkbox"/> Filming for training purposes only: | Consent given/Consent refused* |
| <input type="checkbox"/> Employ a professional photographer (approved by the organisation)
who will take photographs in competitions/galas/meets/events: | Consent given/Consent refused* |

*Delete as appropriate

Signed (parent/carer): _____

Print name: _____

Date: _____

Please return this form to: _____



Child Photography Refusal of Consent Form

Name of child: _____

Date of birth: _____

I refuse permission for the taking and/or publication of **any** images of my child by the organisation's appointed photographer(s) in respect of _____ (activity).

Signed (parent/carer): _____

Print name: _____

Date: _____

Please return this form to: _____

Template welcome letter to parents

This letter is for you to use in full or as a basis for a letter to add to your welcome pack for new parents.

Dear Parent,

The organisation welcomes you and your child(ren) to the _____ (name of club/organisation)). We hope your child(ren) will enjoy the experience of being a member including the training, competitions and the social interaction with all of their fellow members. This letter will provide you with information that may be of assistance to new members. Please do ask me, the welfare officer, or any committee member or coach if you have other questions not covered in this letter.

Firstly who runs the organisation? A full list of the officers, committee members and coaches can be found on the notice board. Below is a list of some of those officers for your information.

Chairman _____ name and contact details _____

Secretary _____ name and contact details _____

Welfare Officer _____ name and contact details _____

Chief Coach _____ name and contact details _____

Parent Liaison Officer _____ name and contact details _____

We are a swim21 club/working towards becoming a swim21 club (delete as required) and follow the guidance in Wavepower for child safeguarding, the ASA Code of Ethics and codes of conduct. While we hope your child will be happy and content at the organisation, sometimes questions, concerns or issues may arise.

If you have a question regarding coaching you should in the first instance approach your child's coach. Do so at a time convenient to you both and please do not go on poolside and interrupt training sessions. The coaches will be happy to arrange a time before or after training to discuss any training issues/our organisation has a dedicated meeting which is held _____ where you can arrange an appointment to speak to the coach. (delete as appropriate) Please ask the parent liaison officer for details.

If you have a question or concern regarding child welfare, the welfare officer should be informed. Alternatively, there is a dedicated helpline for anyone wishing to raise a safeguarding or welfare concern directly to the ASA called Swimline – a Swimline poster with contact details can be found on the notice board.

Our organisation is committed to providing good child safeguarding practice for all our young members and we have adopted the ASA Child Safeguarding Policies and Procedures manual – Wavepower, a copy of which is held by _____ or can be viewed and downloaded from www.swimming.org. Our organisation is one where we accept that good safeguarding and fair play is paramount for all our young members.



Your child(ren) has already been/will be (delete as required) assessed as to what level they are currently achieving to place them in the appropriate training lane and competition level which is outlined below with other helpful information.

(Give details of the below list here as it relates to the child concerned.)

- Team coaches list.
- Details of training times.
- Details of competitions.
- Details of the decision making and procedure by which any parent can question i.e. they should approach the coach/team manager or whoever in the first instant.

The _____ (name of club/organisation) are always looking for parental help to run the organisation. You may offer to help or a member of the committee may approach you to see if you are able to assist. We are predominantly/totally a voluntarily-run organisation and we appreciate all the help parents can give us, however small.

Lastly, we have a parent's Code of Conduct which goes alongside similar codes for the coaches, officers and members. You will be asked to read and sign the parents' Code of Conduct and countersign that of your child/children.

And finally, we hope you and your child/children enjoy being a member of the _____ (name of club/organisation).

Kind regards

(Insert name)
Welfare Officer

(Name of the club/organisation)

Template welcome letter to new members

Dear (member – leave blank to fill in the name)

Welcome to the _____ (name of club/organisation). We hope you will have an enjoyable and happy time as a member of our organisation and that you make many new friends and enjoy training and competing with us.

Your parents have been given a letter which includes details of your training times and lane allocation. This letter is to give you some additional information you may find helpful now or in the future

Coaching

As an ASA swim21 club/club (delete as appropriate) we are committed to helping you swim, to enjoy your training, learn to train hard and to your reach your potential. The coaches and teachers are here to help you do that, and have been trained to do so in a safe and proper manner. You should soon get to know your coach and if you have any concerns about training do talk things over with your coach and your parents.

Safeguarding

You may wonder what we mean by safeguarding. Essentially, alongside our wish for you to enjoy and succeed at your sport, we want to ensure that you are safe and happy at the organisation and that we act upon anything that prevents that. That is what we call 'safeguarding our members'. You may ask what you are being safeguarded from. So for example, we want to make sure you are not being:

- Bullied.
- Treated differently to others.
- Hurt by another person on purpose.
- Not being listened to.

Preventing such behaviour is very important to us as an organisation and to achieve that we have a safeguarding manual called Wavepower. If you want to have a look at Wavepower, the welfare officer will have a copy that you can read or it can be viewed and downloaded from the organisation's website or from www.swimming.org.

We know any bullying or poor behaviour to you would make you feel unhappy, so please do not feel you have to just put up with it. While we will do all we can to prevent anything happening, it is important if something or someone causes you to be unhappy that you tell someone. Tell your parent, your coach, the welfare officer or any other adult you feel happy to speak to. Any issues you raise will be dealt with.

To assist you here are some helpful details of how you can raise concerns:

- Your welfare officer is _____ and they can be contacted on _____
- The ASA also have a helpline called Swimline if you want to tell someone but not anyone in the organisation. The number is 0808 100 4001.



You will be asked to leave a number at which you can be contacted in the next 48 hours. If you feel you cannot wait that long for someone to talk to you, hang on and you will be put through to the NCPCC/ ChildLine helpline number who will answer your call immediately.

- Child Power is an ASA section of the ASA website just for young people like you. It has a message link so that you can send a concern in writing to the ASA Child Safeguarding Team who will then help you with whatever issue you have raised.
- Attached is a Child Power Leaflet. You can use the Your Voice section to put down your concern in writing and give to a parent or trusted adult in the organisation if you can't tell anyone directly.

Codes of conduct

Just as we expect others to behave properly to you, we expect all our members to behave in an appropriate manner to each other as well as their coaches, all helpers, and all adults and young people you have contact with in competitions. We have a code of conduct that you and your parents will be asked to sign and return to the (name of club/organisation) _____. If you are unsure about any aspect of the code of conduct please feel free to ask.

We hope you will have a very happy and successful time while a member of the _____ (name of club/organisation).

From

(Insert name)
Welfare Officer

(Name of the club/organisation)

Note

Any additional information such as the organisation's named member representative on the committee and their details, club captains, etc. should be added where applicable.

New members information checklist

It is important that organisations provide members, and their parents/carers if they are under 18, with information and guidance when they join the club.

The following list is not definitive, but should be used by organisations as a guide to ensure that any important information is given to, or collected from, new members and their parents/carers:

Information to collect from new members

- Completed Medical Information Form
- Emergency contact details
- Completed and signed Member's Code of Conduct

Information to give to new members

- Welcome letter and information pack to member
- Application form to be completed by members if aged 16 or over
- Directions to the organisation's website or notice board
- Directions to the resources available on the ASA website
- Introduce members to the welfare officer
- Details of how to contact the welfare officer should they have a child safeguarding concern or complaint
- Details of who Swimline are along with the contact telephone number
- Details of the organisations swim21 accreditation (if applicable)
- Introduce members to their coach or teacher
- Introduce members to other relevant helpers/officers at the organisation
- Details of the complaints/disciplinary processes
- Guidance on how to raise a complaint if their concern is **not** of a child safeguarding/welfare nature

Information to collect from parents/carers

- Photography Consent Form or Refusal of Consent Form
- Emergency contact details
- Completed and signed Parent's Code of Conduct

Information to give to parents/carers

- Welcome letter and information pack to parents
- Application form to be completed by parents if member is under 16
- Directions to the organisation's website or notice board
- Directions to the parent information section on the ASA website
- Introduce parents/carers to the welfare officer
- Details of how to contact the welfare officer should they have a child safeguarding concern or complaint
- Details of who Swimline are along with the contact telephone number
- Details of who Swimline are along with the contact telephone number
- Details of the organisations swim21 accreditation (if applicable)
- Introduce parents/carers to the member's coach or teacher
- Introduce parents/carers to the other relevant helpers/officers at the organisation
- Details of the complaints/disciplinary processes
- Guidance on how to raise a complaint if their concern is **not** of a child safeguarding/welfare nature



Behaviour Contract Template

Contract between _____ (name of organisation)
and _____ (name of member)

This contract has been drawn up to address incidents of poor behaviour by _____
(name of member) at the _____ (name of organisation).

_____ (name of member) will abide by the code of conduct of the
_____ (name of organisation).

_____ (name of member) will additionally not:

1. (Details of specific actions about which the concerns have been raised.)
2. (Details of specific actions about which the concerns have been raised.)
3. (Details of specific actions about which the concerns have been raised.)

_____ (name of parents) will be required to:

1. (Details of what is required of the parents.)
2. (Details of what is required of the parents.)
3. (Details of what is required of the parents.)

If the member is reported to have breached this contract or to have behaved in a way that would be a serious breach of the code of conduct the following steps should be taken:

1. The parents will be informed immediately.
2. The officers of the organisation (The ASA suggests officers should be named, specifically the chair, welfare officer and coach) will consider through the appropriate method if the allegations made are proven to be true.
3. If the action is proven and is a breach of this contract _____ (name of member) will be (Include details of what the organisation considered to be an appropriate response. This may be a temporary suspension).

Signed

Member: _____

Date: _____

Parent 1: _____

Date: _____

Parent 2: _____

Date: _____

Coach: _____

Date: _____