

Self-Declaration Form

You have a right of access to information held on you and other rights. Data Protection Act 1984.

PART A

Title	First Name	Surname	Any previous names by which you may have been known
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Address:
*Postcode:
Telephone number(s):
E-mail address:

*Postcode MUST be completed

DATE OF BIRTH

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SEX	M		F	
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Current Club(s)	Position	*Please delete as appropriate	Start Date
	Coach/Helper/Team manager /Chaperone/Other *		
	Coach/Helper/Team manager /Chaperone/Other *		
	Coach/Helper/Team manager /Chaperone/Other *		

Club	Date	Club	Date

I confirm that I have seen identification documents relating to this person, and I confirm to the best of my ability that these are accurate. Please detail which documents:

Signature of club secretary or other designated officer:

Print name: Date:.....

PART B

Self Declaration (for completion by the individual named in PART A)

Have you ever been convicted of any criminal offences? YES / NO*

If YES, please supply details of any criminal convictions:

.....
.....

NOTE: You are advised under the provisions of the Rehabilitation of Offenders Act 1974 (exceptions) order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions Amendment) Order 1986 you should declare all convictions including ‘spent’ convictions.

Are you a person known to any social services department as being an actual or potential risk to children? If YES, please supply details: YES / NO*

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.....

Have you had a disciplinary sanction (from a sports or other organisations governing body) relating to child abuse? YES / NO*

If YES, please supply details:

.....
.....

* Delete as appropriate

IMPORTANT

I have read and understood the WEBSF Child Protection Policy.

I hereby consent to WEBSF undertaking police and/or social services checks against me.

I understand that the information contained on this form, the results of police and social services checks and information supplied by third parties, will be may be supplied by WEBSF to other persons or organisations who have an interest in child protection issues.

I agree to inform WEBSF within 24 hours if I am arrested or investigated for any child welfare/abuse related matter.

Signed by the above named individual: Date:

Print name:

This form should be returned **DIRECT** to: **The WEBSF Child Protection Officer**

22 Grove Road, Whimble, Exeter EX5 2TP