



Section 3 - Policies and procedures

3.1.5 - Self declaration form for people working with children.

Please return to Chippenham Tennis Club.

| | | |
|---|--|--|
| Full name (please print) | | |
| Any previous or other names | | |
| Date & place of birth | | |
| Current address | | |
| Previous address (if you have been at your current address for less than 5 years) | | |

Have you been convicted of any offence or had a conviction or been bound over; or is a prosecution pending related to: children, any offence under the Sexual Offences Act, any offence involving violence of any nature or drug related offences? (Note: You are advised that you should declare ALL convictions including 'spent' convictions where working with children.)

| | |
|-----|--------------------------|
| Yes | <input type="checkbox"/> |
| No | <input type="checkbox"/> |

If you have ticked this box please provide details below

| |
|--------------------------------------|
| Full details if answered "yes" above |
|--------------------------------------|

Are you a person known to ANY social services department as being an actual or potential risk to children, vulnerable adults or any other people?

| | |
|-----|--------------------------|
| Yes | <input type="checkbox"/> |
| No | <input type="checkbox"/> |

If you have ticked this box please provide details below

| |
|--------------------------------------|
| Full details if answered "yes" above |
|--------------------------------------|

Have you ever had a sanction imposed against you or been disciplined in any way for any matter relating to child abuse, sexual offences, violence or the use of drugs?

| | |
|-----|--------------------------|
| Yes | <input type="checkbox"/> |
|-----|--------------------------|

If you have ticked this box please provide details below



| | |
|----|--|
| No | |
|----|--|

| |
|--------------------------------------|
| Full details if answered "yes" above |
|--------------------------------------|

Please list your current club and the last three (if applicable) with which you have been associated:

| | |
|---------------------|--|
| Club name & address | |
| Club name & address | |
| Club name & address | |
| Club name & address | |

Please supply the names and addresses of two referees whom the LTA can contact regarding your suitability to work with children or vulnerable adults (these must not be a partner or relation).

| | |
|--|--|
| Full name | Full name |
| Address | Address |
| Phone no. | Phone no. |
| Relationship to referee | Relationship to referee |
| How long have you been known to the referee? | How long have you been known to the referee? |

CONSENT - please read carefully

I hereby consent to Chippenham Tennis Club undertaking criminal record and/or social services and other relevant third party checks in connection with this self-declaration in line with LTA policy on the safeguarding of children. I understand that the information contained on this form, the results of any police and/or social services checks and information supplied by third parties will be recorded by the Chippenham Tennis Club and/or the LTA. I understand that, if I continue to be associated with the Chippenham Tennis Club, I must inform this body immediately of any changes relating to the questions above. I understand that action may be taken should I complete this form with false information or with information I know or believe to be incorrect. I understand that I have the right of access to information held on me and other rights under the Data Protection Act 1984.

| | | | |
|--------|--|------|--|
| Signed | | Date | |
|--------|--|------|--|

