

Vineyard Isle of Man
Safeguarding Form

Your Name:

Your connection to Vineyard Church Isle of Man

Staff member / Volunteer member / Member of the public / Other

Your contact Number:

Your Email Address:

Tell us who you have a concern about

Adult or Child's Full Name:

Adult or Child's Address:

If known, please tell us the address of the person you have a concern about.

Where (location) did it take place?

Tell us about your concern, the disclosure or the incident you are reporting, and why you think it needs action.

Please provide as much information as you can including names, times and dates.

Who saw it?

Action taken so far

Has any action been taken by a third party? Please identify who else has been informed of this.

I confirm that the information I have included in this form is, to the best of my knowledge, accurate and I hereby give permission for Vineyard Church Isle of Man to contact me on the details provided if further clarification about this matter is required.

I agree. Signed.....

Please hand this form into the relevant Designated Safeguarding Lead / Deputy Safeguarding officer / Church Leader as appropriate. Or email a scanned copy to safeguarding@vineyardchurch.im