

League or Competition Affiliation Form – Season 2017/2018

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| **League or Competition Details** |
| Name of League or Competition: |  |
| Type of Competition: *(see* ***\**** *below)* |  |
| Day of Week League plays on: |  | ***or*** | Anticipated Date of Competition: |  |
| Year League/Competition formed: |  | Participants:  | **Male** / **Female** / **Mixed** |
| League Sponsor: |  | Date of AGM: |  |

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| **League or Competition Secretary Details**   | **Match / Fixture Secretary Details** |
| Secretary Name: | Secretary Name: |
| Secretary Address: | Secretary Address: |
|  |  |
|   |  |
|  |  |  |
| Postcode: |  | Postcode: |  |
| Telephone Home: |  | Telephone Home: |  |
| Telephone Work: |  | Telephone Work: |  |
| Mobile: |  | Mobile: |  |
| Fax: |  | Fax: |  |
| E-mail Address: |  | E-mail Address: |  |
| ***Date of Birth:*** |  | ***Date of Birth:*** |  |
| ***Place of Birth:*** |  | ***Place of Birth:*** |  |
| ***Mother's Maiden Name:*** |  | ***Mother's Maiden Name:*** |  |

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| **Contact Officers** (PLEASE ADVISE THE NAMES & ADDRESSES OF THE FOLLOWING OFFICERS FOR SEASON 2017/2018) |
| **Chairman** Name: | **Treasurer** Name: |
| Address: | Address: |
|  |  |
|   |  |
|  |  |  |
| Postcode: |  | Postcode: |  |
| ***Date of Birth:*** |  | ***Date of Birth:*** |  |

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| Affiliation & Insurance Fees |  |  | **Cost** | **Total** |
| **Single** League / **Single** Cup Competition (*including Charity & small-sided*)  | £25 |  |
|  |  |  |
|  | **TOTAL ENCLOSED** |  |

Cheques to be made payable to the **Cambridgeshire Football Association Limited**. Please ***do not*** send cash through the post

 **Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **League / Competition Secretary**

**By signing this form on behalf of the League/Competition, the League/Competition applies for Membership of the Company and agrees to be bound by the Memorandum and Articles of Association of the Company and any Rules and Regulations made pursuant thereto.**

**This form and the appropriate fee should be returned to the County Headquarters at:**

Cambridgeshire Football Association Limited, Bridge Road, Impington, Cambridge, CB24 9PH

*Any telephone enquiries, please, to Colin Hills, Operations Manager on 01223 209022*

**Insert club logo/headed paper**

**Risk Assessment**

|  |  |
| --- | --- |
| Name of event/activity |  |
| Date(s) of activities/ frequency |  |
| Venue address |  |
| Lead delivery organisation |  |
| Lead contact name(s) and number(s) |  |
| Delivery organisation’s lead contact(s)(if different) |  |
| Event /activity Co-ordinator |  |
| Event Designated Safeguarding Officer |  |
| Where unaffiliated/outside agencies such as schools, colleges, uniformed organisations etc. are hiring facilities which organisation’s safeguarding policy and procedures will be followed in the event of a concern arising |  |
| Where there is a contract for services or SLA in placedoes this specify or reference the necessary/minimum safeguarding arrangements |  |

**Safeguarding Risk Assessment**

The safeguarding section of this risk assessment must be completed for all activities and events involving people under the age of 18. This includes open age activities where players/volunteers may be 16 or 17. If the event or activity does not include people under the age of 18, for example, veterans’ activities, please progress to section 2.

Safeguarding Operating Standard, Template resource to be used in conjunction with CFA Safeguarding Checklist

## Introduction

This risk assessment tool template has been developed in line with CPSU (Child Protection in Sport Unit) guidance and The FA’s Safeguarding Checklist to support

CFAs making safeguarding risk assessments where they are providing or commissioning activities for children and young people

and /or where facilities are being hired by outside organisations. It is intended to help CFAs ensure that the safety and welfare of children and young people is the paramount consideration within the planning and delivery of activities specifically for

under-18s.

## Ownership

Where activities are run directly by the CFA it would be expected that the CFA would take the lead in ensuring that the risk assessment is completed and reviewed. Where facilities are being hired or delivery partners are being used the risk assessment should be jointly owned with safeguarding responsibilities being identified as part of any contract of hire or SLA.

# Section one (safeguarding)

**N.B.** this should include any additional planning arising for the needs of vulnerable groups and age range of children

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| **Activity/****consideration point** | **Risk to children** | **Solution/mitigation** | **Risk after mitigation** |
| Consent (As a guide all under-16s must provideparental/legal carers consent,Over 16s may self-consent for certain levels of activity at the digression of the CountyAssociation/The FA. However, all under-18s must provide parental consent in relation to overnight/foreign travel). | **Risk before mitigation:****(low/medium/high)** | Pre:During:After: | **(Low/Medium/High)** |
| When organisation deploys U18 referees or coaches, organisation will ensure direct points of contact is communicated and emergency contact information is held |  |  |  |
| Staffing ratios | **Example:** Insufficient staff to children ratio poses a risk where children will be unsupervised during activities**Risk before mitigation:****High** | **Example:****Pre:** Provide written information to all participating teams of required staff to children ratio to include consequences of not having the correct ratio (i.e. teams will not be able to participate)**During:** Check and verbally confirm the correct ratios are in place.**After:** Review and evaluate | Low |
| Staff DBS checks |  |  |  |
| Staff safeguarding education |  |  |  |
| Young leaders involvement |  |  |  |
| Suitability of changing facilities |  |  |  |
| Toilet provision |  |  |  |
| **Activity/****consideration point** | **Risk to children** | **Solution/mitigation** | **Risk after mitigation** |
| Relevant insurance is in place | **Risk before mitigation:****(low/medium/high)** |  |  |
| Travel arrangements | **Example:**Children travelling with adults without consent or with the correct ratio of adults to children.Children are dropped off early or collected late and left unsupervised.**Risk before mitigation:****High** | **Example:****Pre:** Provide written information to clubs/parents/staff advising of their responsibility of children’s welfare to and from the event. Ensure adults are aware of risks if children are left unattended before or after event.Staff advised of arrival time to allow for supervision if children arrive early. Staff to remain on site until all children have been collected.Consider risk to U18 referees travelling to open age games and open age players travelling to open age games.**During:** Check with children what travel; arrangements they have. Check with adults what travel arrangements they have.**After:** Review travel arrangements with club/event organisers to inform better strategy if there were any issues.  | Medium |
| Drop-off and pick-up arrangements |  |  |  |
| Photography/film consent |  |  |  |
| Communications/social media considerations |  |  |  |
| First aid and medical Information |  |  |  |
| Referral of concerns and managing allegations |  |  |  |
| Emergency evacuation procedures |  |  |  |
| Other |  |  |  |

**Section two (general risks)**

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| --- | --- | --- | --- |
| **Activity/****consideration point** | **Risk**  | **Solution/mitigation** | **Risk after mitigation** |
| Goalposts | Risk before mitigation:(low/medium/high) |  | **(Low/Medium/High)** |
| Playing surface | **Risk before mitigation:****(low/medium/high)** |  |  |
| Glass, sharps etc., or animal faeces | **Risk before mitigation:****(low/medium/high)** |  |  |
| Balls and other equipment | **Risk before mitigation:****(low/medium/high)** |  |  |
| Player equipment/clothing (shin pads/footwear/jewellery) |  |  |  |
| Food and drink |  |  |  |
| Conduct of players, officials and spectators |  |  |  |
| Weather extremes |  |  |  |
| Lone/late working procedure (if applicable) |  |  |  |
| Class room (if applicable) |  |  |  |

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| **Risk assessment completed** | **Name** | **Date** |
| **Safeguarding checklist completed** | **Name** | **Date** |
| **Updated** | **Name** | **Date** |

## Review

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| Post activity review of risk assessment | Observations/ additional risks identified | Actions |