



Police Notified (time)	hours
Police Incident number	CAD.
Police Contact (if provided)	
Police attended	(Y/N)

LOST/FOUND CHILD FORM

(Details for records only, not to be announced over the P.A.)

Contact the police immediately if you have any concerns for the child/ young person or adult at risk's immediate safety

Event Name: .....

Date: .....

Child's Name:		Age of child:
Male or Female:		D.O.B.:
Time and place child last seen:		Time event staff informed:
Hair Colour:	Clothing (Colour & Pattern):	
Eye Colour:		
Ethnicity:	Any other relevant information:	
Any known medical information:	Any known medication & when required:	
Spectator or Participant or Other:		
Parent/Guardian name:	Phone Number:	
(as reported or from player registration form if participant):	Address:	
Actions	Time	Details of who informed
Event Security Informed		
Parent/ guardian Informed (if not present)		
All missing child incidents MUST BE notified at the very earliest opportunity to the County Safeguarding Officer - Dal Babu <a href="mailto:safeguarding@middlesexccc.com">safeguarding@middlesexccc.com</a> and they must notify the ECB Safeguarding Team.		



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**Found Child (member of public or participant)**

Time found:	Location found:
Child's Name:	Age of child:
Male or Female:	D.O.B.:
Hair Colour:	Clothing (Colour & Pattern):
Eye Colour:	
Ethnicity:	Any other relevant information:
Spectator or Participant or Other:	
Has the child any special medical requirements? (check for medical tags)	Name of Security/Steward & Head of security dealing with child:
Time child handed over to Lost Child Unit:	Adult handing the child over  Name:  Tel:  Role:
Time Event Control was informed:	Any other information:
Name of Parent/Carer collecting child:	Phone Number:
Relationship to child:	Address:
Signature:	ID document/s checked:
Member of event staff handing over child:	Time child reunited:
Signature:	