High Street, Sittingbourne, ME10 4AQ

 01795 420990

[www.sbc-church.org.uk/
sittingbourne-contact-centre](http://www.sbc-church.org.uk)

contact.centre@sbc-church.org.uk

CONTACT CENTRE

###

Start date: *(box for office use only)*

£10 Administration fee paid yes/no

Referral Form

Adult with whom child resides:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child(ren)

Adult who is having contact:

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child(ren)

Solicitor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Solicitor Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Children’s full names | Dates of birth | Boy/girl |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Dates and Terms of any

Contact Order:

(eg. Children must

Remain in centre

Building.

Attach copy)

If there is no order, have the parents agreed that the child can be taken out of the Centre? Yes/No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are the parents willing to meet? | Yes | No | Maybe | If they are not willing to meet we ask the carer to bring the child/ren 10 minutes later. |

Has any child named on this form been included on a child protection “at risk” register because of abuse of parent. **Yes/no**

Has any adult who will be using the Centre under the terms of this referral been convicted of a criminal offence involving child abuse? **Yes/no**

How frequent would contact be preferred? Weekly Fortnightly Monthly

Any other details which may be helpful please.