



FORM 13

USE OF FRANCISCAN PROPERTY BY EXTERNAL GROUPS

The Franciscan Order welcomes other organisations, groups, and individuals within the community to use our facilities. While you are using the Order's facilities, we want to be assured that all reasonable steps have been taken towards safeguarding children. The responsibility for complying with good safeguarding practice rests with the group or individual using our property and not with the Franciscan Order.

The Franciscan Order requires detailed information in respect of your application to ensure that the safety and well being of children are maintained at all times. This form must be completed by all external groups and given to the Guardian or Superior before any activity in, or use of Franciscan church property, hall, retreat, or day centre can be agreed and approved.

Name of group/Organization/Activity: _____

Purpose or proposed activities: _____

User group, (e.g children, adults): _____

Date of commencement of use: _____

Date of completion of use: _____

Frequency of use: _____

NAMES, ADDRESS, CONTACT DETAILS OF PERSON/S IN CHARGE DURING USE

(1) _____

(2) _____

Does the group have its own Child Safeguarding Statement in place (legal requirement for 'relevant services First Children the under Act 2015 ²)?

Yes No

Does the group have a Child Safeguarding Policy and Procedures in place?

Yes No

²As listed in Schedule 1 of the Children First Act 2015.

Does the group have appropriate public liability and/or employer's liability and professional indemnity, if appropriate) insurance cover for the activity?

Yes No

Name of Insurance Company: _____

Policy Number: _____

Period of cover of the Policy: _____

Limit of Indemnity: _____

I/we declare that the information provided is accurate and that changes in circumstances, if any, will be communicated to the Guardian or Superior. I/we declare that the activity will be terminated if there is any breach of the above conditions.

TO BE SIGNED BY OFFICIAL CO-ORDINATOR OF THE EXTERNAL ORGANISATION OR GROUP.

Full name (print) _____

Position _____

Signed _____

Date _____

I give not give permission for this activity to go ahead.

Signed Guardian/Superior _____

Date _____

NOTE:

- a. This activity will be reviewed by the Guardian/Superior and/or his Designated Representative annually.
- b. The Franciscan Order will not require sight of nor retain copies of external groups policies or procedures.