



INCIDENT REPORTING FORM

The purpose of this form is to assist the Board of Directors in obtaining valuable information regarding possible violations of the league's code of conduct. This form can be completed by any person that observed a violation, or is directly involved in the incident.

HOW TO COMPLETE THIS FORM

When completing this form, please list the facts only. Try and describe what happened as if you were a video recorder. Avoid including your emotional reactions to what happened. We are interested in the **WHO, WHAT, and WHERE** of the incident. After completing this form, please hand it to **ANY** league official or manager **NOT INVOLVED** in the incident addressed on the form.

DATE, TIME, AND LOCATION OF THE INCIDENT:

PERSON(S) INVOLVED:

WHAT OCCURRED:

WITNESSES:

YOUR NAME & NUMBER: _____

(Your name is required for reporting purposes only, and will NOT be made public)



(Below this line for League use only)

League official receiving form: _____

Date Received: _____

Action Taken: _____