



## Lady Islanders Incident / Complaint Report

Complaint <input type="checkbox"/>	Incident <input type="checkbox"/>	Date of incident	Date of report
Name of person filing		Phone	cell
Address		City	zip
e-mail		Which team?	
<i>Please check all boxes below that apply</i>			
Incident location On-ice <input type="checkbox"/> Off-ice <input type="checkbox"/> locker room <input type="checkbox"/> game <input type="checkbox"/> practice <input type="checkbox"/> other (describe):			
Incident involved: player(s) <input type="checkbox"/> parent(s) <input type="checkbox"/> Coach(es) <input type="checkbox"/> Ref(s) <input type="checkbox"/> Other (describe):			
Description of incident / complaint: <i>(Please be as brief as possible; state only the facts- who, what when where. Use additional sheet if necessary)</i>			
Outcome <i>(what happened after incident)</i> :			
Persons notified: coach <input type="checkbox"/> manager <input type="checkbox"/> parent <input type="checkbox"/> board member <input type="checkbox"/> police <input type="checkbox"/> other (describe) List names:			
Others present: <i>(list)</i>			
<i>Official Board use:</i>			
Date received:	Received by:		Outcome: resolved <input type="checkbox"/> pending <input type="checkbox"/>
Notified: LIAHL <input type="checkbox"/> MAHWA <input type="checkbox"/> USA Hockey <input type="checkbox"/> Other (describe):			