



# WAIKATO SECONDARY SCHOOLS BASKETBALL LEAGUE COMPLAINT AND INCIDENT REPORT FORM



TYPE OF INCIDENT or COMPLAINT *[tick box]*

- HEALTH & SAFETY *[Injury & Risk]*
- RULES – WSSSA Rules or MATCH PLAY Rules *[Game Rules or Technical]*

VENUE: \_\_\_\_\_

VENUE MANAGER or HOST: \_\_\_\_\_

LEAGUE GRADE: \_\_\_\_\_ TEAM (S): \_\_\_\_\_

TEAM MANAGER \_\_\_\_\_ TEAM COACH: \_\_\_\_\_

DATE and TIME OF INCIDENT or COMPLAINT: \_\_\_\_\_

TYPE OF INCIDENT or COMPLAINT: \_\_\_\_\_

PERSON(S) INVOLVED *(please list team in brackets)*: \_\_\_\_\_

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

DETAIL OF INCIDENT or COMPLAINT: *[If rules involved please state rules WSSSA or Code rules]*

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

REFEREE(S) COMMENT: \_\_\_\_\_

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

CAPTAIN'S AND OR COACH'S COMMENT: \_\_\_\_\_

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

SPECTATORS REPORT *(if any required)*: \_\_\_\_\_

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

Reporting person SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Match Official or Venue Manager: \_\_\_\_\_ DATE: \_\_\_\_\_

*(Signature)*