

Complaint and Incident Report Form

- Health and Safety (Injury and Risk)
- Rules - WSSSA Rules or Match Play Rules

Venue:	Venue Manager:	
League Grade:	Team Coach:	
Teams involved:		
Date and time of incident:		
Type of incident or complaint:		
Person(s) involved:		
Summary of incident:		
<i>To be filled out by WSSSA Administrator</i>		
Actions Taken	(RSO) Recommendation	School Action taken

Please sign below to officiate this complaint:

Name of Person reporting: _____

Reporting person Signature: _____

Date:

Match Official or Venue Manager signature: _____

Date: