



FORMAL COMPLAINT FORM

DETAILS OF COMPLAINT					
NAME					
STATUS (pls circle one)	PLAYER	COACH	SPECTATOR		
IF PLAYER, PLAYER NO		OTHER			
TEAM					
OPPOSING TEAM					
REFEREE					
UMPIRE					
MATCH DETAILS					
COMPLAINT RELATED TO	REFEREE	STAFF	EQUIPMENT	PLAYING ENVIRONMENT	OTHER
DESCRIBE WHAT OCCURED					
COMPLAINT DETAILS					
DATE		TIME			
PLACE		WHO YOU REPORTED IT TO			
HAS THE PROBLEM OCCURRED BEFORE?	YES		NO		
WERE THE ACTIONS UNLAWFUL, UNFAIR, UNJUSTIFIED OR A BREACH OF BASELTBALL QLD/ BASKETBALL AUSTRALIA MEMBER PROTECTION POLICY? IF SO, PLEASE EXPLAIN WHY					
HOW COULD THIS SITUATION BE RESOLVED?					
COMPLAINANTS SIGNATURE					
DATE					
ONCE THIS FORM IS COMPLETED, FORWARD TO CLIPPERS VIA EMAIL: ops.suncoastclippers@gmail.com					