

Phoebus Little League Conduct Complaint Form

Date Reported: _____

Date of Incident: _____ Time of Incident: _____

1. Did this incident occur during a game or practice? Yes No

2. Did the incident/conduct involve an :

Spectator	Yes	No	Name if known : _____
Coach	Yes	No	Name if known : _____
Umpire	Yes	No	Name if known : _____
Player	Yes	No	Name if known : _____
Parent	Yes	No	Name if known : _____
Board Member	Yes	No	Name if known : _____
Other Volunteer	Yes	No	Name if known : _____

3. Did the incident involve verbal abuse or profanity? Yes No

4. Did the incident involve physical abuse? Yes No

5. How many players/youths witnessed the incident? _____

6. Does your complaint involve a non-game issue? Yes No

Description of Complaint – Include any Witness(es) Information (*use additional pages if needed*)

Signed: _____ Date : _____

Print Name: _____ Phone: _____

Please forward this completed form to any Team Manager, Coach, Umpire or any Board Member to be forwarded to the League's Conduct Review Committee for review and action. You will be contacted if additional information is required to complete the investigation of this complaint.