

Title/Role:

211 Chancellor Matheson Road Winnipeg, Manitoba, Canada R3T 1Z2 Phone: 204-233-8899 Fax: 204-233-9121 Email: wysa@wpgsoccer.com Website: www.winnipegyouthsoccer.com

FORMAL COMPLAINT FORM

Any person may file a report where that person believes conduct has taken place that does not uphold the WYSA By-Laws, Policies & Procedures, Rules and Regulations, and/or Code of Conduct, or that of any WYSA Member Organization. The Formal Complaint, along with all supporting evidence, is to be made in writing and sent to scott@wpgsoccer.com where it will be reviewed by the WYSA Executive Director and forwarded to the WYSA Member Organization, or, WYSA Discipline Chair, whichever is deemed appropriate given the circumstances.

Please complete the following: 1) The person making the complaint is a: Team Official Match Official Player **Parent** Volunteer First Name: Last Name: Address: Team Name: Club/Association: **Email Address:** Phone Number: 2) The person on whose behalf the complaint is made: (to be completed if different from above and the person who the complaint is made on behalf of is a minor) First Name: Last Name: Birth date (day/month/year): Relationship to the person identified in #1 above: 3) Identity of person(s) who complaint is against: First Name: Last Name:

Club/Association:



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PERSON 2		
First Name:	Last Name:	
Title/Role:	Club/Association:	
3) Explain what Bylaw, Policy & P	Procedure, and/or Rule has been violated:	



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4) Explain what happened, including date(s), time(s) and location(s) where the incident(s) took place:



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5) Attach evidence (photos, video, emails) including any witness statements including their contact information. Please list the evidence in a coherent manner below, and, write the number on the			
attached evidence so they match.	, ,		
s) Is there any further information to provi	de:		
	rledge and belief that the above-mentioned information is nat making false, malicious, or frivolous allegations is in subject to disciplinary measures.		
further recognize that the contents of this Member Organization and/or person(s) ago	document and any attachments will be shared with the ainst whom it has been filed.		
Signature of the complainant	 Date		