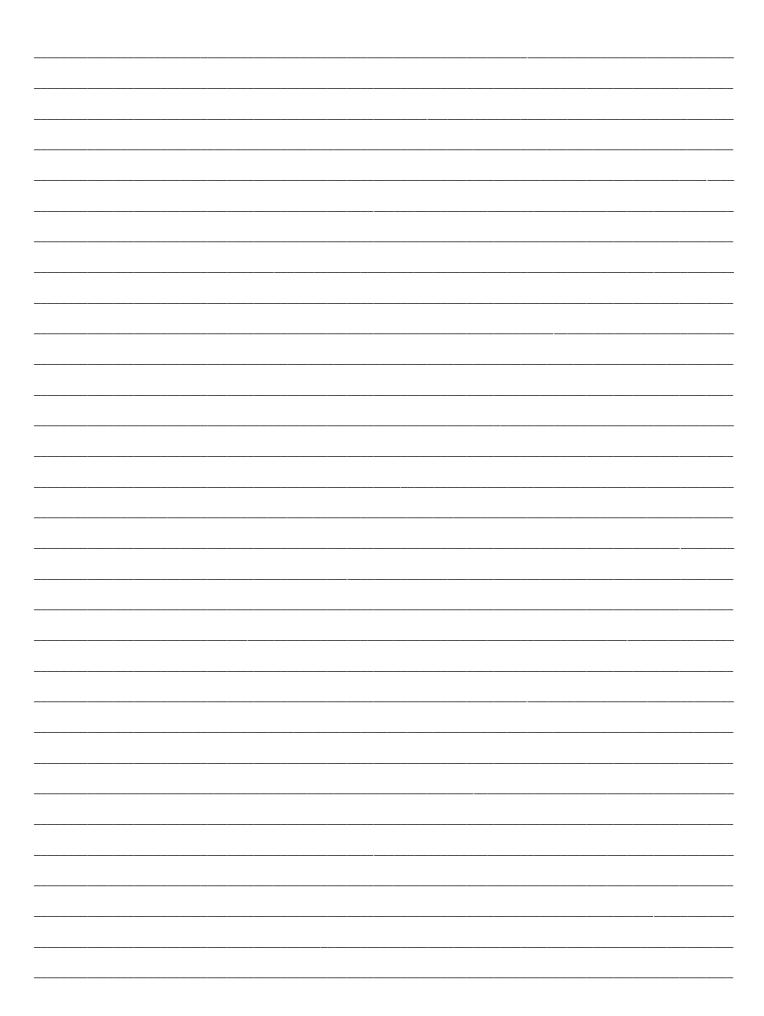


HOCKEY NEWFOUNDLAND AND LABRADOR COMPLAINT INTAKE FORM

Please complete the following:						
1. Person making the complaint:	G Player	G Parent	G Volunteer	G Official	G Employee	
First Name		Last Name				
Address	I.					
City/Town		Province		Postal Code	e	
Telephone Number		Fax Number	Number		E-mail	
2. Person on whose behalf the co First Name	omplaint is made	: (to be completed i	f different from a	bove)		
Birth Date (day/month/year)		2.001.4.000				
3. Name of person(s) against who	om you are comp	laining:				
First Name		Last Name				
Title/Role		Name of Ass	ociation/Club			
First Name		Last Name				
Title/Role		Name of Ass	ociation/Club			

4.	When did the last incident occur? (Date)							
5.	Please check th	ne grounds(s) tha	t best des	scribes y	your complaint	:		
A	G Harassment (refer to Appendix A)							
Type o	f behavior:							
G	Conduct G	Gestures	G Com	ments				
Based	On:							
G	Race	G Ethnic	ity	G	Disability		G	Color
G	Religion G	Age	G	Sexua	al Orientation	G	Sex	
G	Marital Status	G Family	Status	G	Pardoned Co	onviction		
В	G Abuse	(refer to Appendi	x A)					
Type o	f behavior:							
G Phys	ical G Emo	otional G Sexu	ıalG Negl	ect				
C	G Bullyii	ng (refer to Appen	dix A)					
Type o	f behavior:							
G Phys	ical G Verb	oalG Relational	G Reac	tive				
D	G Miscon	nduct (refer to Ap	pendix A))				
6.								ummary must answer the following onal documents as necessary.
1. 2. 3. 4. 5. 6. 7. 8.			ncident(s) ved? (Nar ? treated di ident(s) re es & conta) happer me and t fferently elate to t act infor	ile/role) y from others? (I the ground(s) yo rmation, if applie	u selected?		
NOTE	: All complaints v	will be dealt with	only if wr	itten inf	formation is prov	vided.		



•			
Date	-	Cianatura	
Date		Signature	