



Fort Worth Adult Soccer Association Complaint Form

(PLEASE FILL OUT THE FORM ON A COMPUTER IF POSSIBLE TO AVOID HANDWRITING)

Name of person submitting report: _____

Team affiliation of person submitting report: _____

Date form submitted to FWASA office: _____

Date and Time of game: _____

Field Location: _____

League/Division: _____

Complaint against Team Name: _____

Complaint against Player Name and/or Number (if necessary): _____

Complaint against Field Monitor Name: _____

Complaint against Referee Name and Position (Center/AR1/AR2): _____

Please provide a detailed description of the events that occurred during the game and your concerns regarding these events:

Were there any other witnesses of this event or behaviors? Please list names if possible.

This form will be kept on file for the team or individual that this report was filed against. The FWASA board and A&D Committee will not take any immediate disciplinary actions or dispense any punishments on the basis of this report alone; however, these reports could be considered as additional information and factor into decisions made by the A&D Committee regarding punishable offenses (for example, red cards). Submit completed forms to office@fwasa.org, vp@fwasa.org, and your league commissioner.