

Title/Role:

965 Winnipeg Street Prince George, BC V2L 5M9 Phone: 250-640-5900

Email: impact@pgysa.bc.ca

pgysa.bc.ca

## FORMAL COMPLAINT FORM

Any person may file a report where that person believes conduct has taken place that does not uphold the PGYSA IMPACT SC Bylaws, Constitution, Rules and Regulations, and/or Code of Conduct. The Formal Complaint, along with all supporting evidence, is to be made in writing and sent to <a href="mailto:impact@pgysa.bc.ca">impact@pgysa.bc.ca</a>, where it will be reviewed by the Club Director and/or Club President and/or Discipline Chair.

## Please complete the following: 1) The person making the complaint is a: Player Parent Team Official Match Official 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:



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PERSON 2		
First Name:	Last Name:	
Title/Role:	Club/Association:	
3)Explain what Bylaw, Constitution, 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 all evidence below and write the number on the		
attached evidence so they match.		
6)Any further information or evidence may be	e provided here:	
I hereby certify that to the best of my knowled information is true, accurate and complete. It frivolous allegations is in violation of the PGY disciplinary measures.		
I further recognize that the contents of this do the Club and/or person(s) against whom it ha	ocument and any attachments will be shared with is been filed.	
Signature of the complainant	Date	