



Please complete the following:

1. Person making the complaint:

☐ Player	☐ Parent/Guardian	☐ Volunteer	☐ Official	☐ Team Staff
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First Name	Last Name
Address	
City/Town/Province	Postal Code
Telephone Number	e-mail Address

2. 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)

Full Name
Birthdate(day/month/year)
Relationship to the person identified in #1

3. Identity of person(s) who complaint is against:

Full Name
Title/Role
Age group

4. Nature of the Allegations (check the box that best applies)

☐ Discrimination	☐ Bullying	☐ Abuse	☐ Other
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5. Date(s), time(s) and places where the incident(s) took place:

6. Explain what happened: (attach additional sheets of paper if necessary)

7. List any people who have been spoken to about the behaviour:

8. To your knowledge, what steps, if any, have been taken to deal with the situation?

9. Provide suggestions to improve the situation.

10. List on a separate sheet of paper the names and contact information of anyone who may have witnessed the incident(s) or people you feel should be spoken to concerning the complaint.

I hereby certify that to the best of my knowledge and belief that the above-mentioned information is true, accurate and complete. I am aware that making false, malicious or frivolous allegations is in violation of DMH Discipline Policy and subject to disciplinary action by DMH. I further recognize that the contents of this document and any attachments (with the exception of any witness list provided) will be shared with the person(s) against whom it has been filed.

Signature of the complainant

Date

