

CARSTAIRS MINOR HOCKEY ASSOCIATION COMPLAINT FORM



Please note the following:

- Always wait for the 24-hour cooling off period to expire before beginning the complaint process
- Please refer to Policy B (Grievance) for further information available on carstairsminorhockey.ca
- Complaints will only be addressed if they are fully completed, have contact information and are signed by the submitter
- Carstairs Minor Hockey Association (CMHA) cannot guarantee complete confidentiality. Portions of this document may have to be shared in an effort to resolve this complaint. By completing the form, you agree that the CMHA may share some or all of this information in the process of resolving the complaint
- Provide hand the completed form to the CMHA President or email the fully completed form to president.carstairsmha@gmail.com

Please complete the following:

1. **Person making the complaint:** Parent CAHL Director Game Official CMHA Volunteer

First Name		Last Name	
Address			
City/Town		Province	Postal Code
Telephone Number		Cell Phone Number	Email

2. **Person on whose behalf the complaint is made:** (to be completed if different from above)

First Name		Last Name	
Telephone Number			
Email Address			

3. **Name of person(s) against whom you are complaining if known:**

First Name		Last Name	
Title/Role		Name of Association	
First Name		Last Name	
Title/Role		Name of Association	

4. **Details of the CMHA Members, the game location, the Division, the Tier or the event involved in this complaint?**

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5. **Particulars:** Provide a summary of the incidents you are complaining about, provide as much specific detail as possible. Your summary must answer the questions listed below. Section 5 is to be no longer than this page. You may attach any additional documents as you feel are necessary. Witness statements would be appreciated if available.

1. When did the incident(s) happen – provide exact date and time
2. Where did the incident(s) happen?
3. Who was involved (team information, names and title/role)?
4. What happened?
5. How did the incident happen (what happened that led up to the incident)?
6. What remedy or resolution are you seeking?

Date:

Signature of Complainant