

Dispute Resolution form (to be used for complaints filed)

Have you honoured the 24 Hour Rule ? ☐ Yes ☐ No (please see or	r website for information on the <u>24 Hour Rule</u> before proceeding)
COMPLAINANT INFORMATION	
Name of individual filing	
Phone Cell _	
Email	
In what capacity are you a member of the Kamloops Community F Coach Board Member Manager Parent Other	ootball Society? □ Player □ Volunteer
What team are you associated with ☐ Atom (U10) ☐ Pee Wed	
INCIDENT INFORMATION Date and Time of Incident	
Location of Incident	
COMPLAINT INFORMATION Complaint is being filed against	(Respondent)
In what capacity is the Respondent a member of the Kamloops Col Coach Board Member Manager Parent Other	□ Player □ Volunteer
Were there other parties directly involved in the incident? $\ \square$ Yes If yes, Please input their info below:	□ No
#1 Name	_ Phone/Cell
#2 Name	Phone/Cell
#2 Nama	Phono/Coll



Were there witness' to the incident? ☐ Yes ☐ No If yes, please input their info below:				
#1 Name	#2 Name			
#1 Phone/Cell	#2 Phone/Cell			
#1 Phone/Cell #1 Signature	#2 Signature			
DESCRIPTION OF EVENT(s) OR INCIDENT(S) Please include circumstances leading up to the event(s), the specifics around the incident(s), and the situation upon dispersal.				
Complaint:				
I declare, to the best of my knowledge, that the information contained in this complaint is correct.				
Signature	Date			
If the Complainant is a minor when the complaint is filed, this form must be co-signed by the minor's parent or legal guardian. Declaration of the Co-Signer: "I have read the completed Compliant Form and understand that the information contained in this Complaint is correct.				
Signature	Date			



Please submit your complaint form to the team manager. The form will then be submitted to the Dispute Resolution Committee and our resolution process will begin. If you would like more detail of our resolution process please visit our website at www.kcfs.ca under the "RESOURCES" tab.

Manager Received on:		_ Time:	_ Submitted To:	
BOARD MEMBER/DISPUTE RESOLUTION COMMITTEE USE ONLY				
Complaint Received on	:	_ Time:	Submitted To:	
Date of Contact and Confirmation with Respondent:				
Complaint Resolved?	☐ Yes ☐ No		Date:	
Description of how the complaint was resolved.				
Notification of resolution sent to:				
☐ Complainant	Date and Time:			
☐ Respondent	Date and Time:			