

**OPTIMIST CLUB of MIAMI LAKES  
FLAG FOOTBALL  
INCIDENT REPORTING FORM**

Please **print or type** the requested information listed below and submit to your League President (a listing of all contacts are posted on our website [www.miamilakesoptimist.org](http://www.miamilakesoptimist.org)) or mail to: Miami Lakes Optimist Club; P.O. Box 4034 – Miami Lakes, FL 33014.

**Circle One:**                      Game                                      Practice

**REPORT SUBMISSION DATE:** \_\_\_\_\_

**YOUR NAME:** \_\_\_\_\_

**YOUR CHILD'S NAME:** \_\_\_\_\_

**YOUR CHILD'S DIVISION** \_\_\_\_\_

**YOUR CHILD'S TEAM:** \_\_\_\_\_

**YOUR CHILD'S MANAGER:** \_\_\_\_\_

Please describe (briefly) the nature of your concern, issue or incident you wish to report. Please be as specific as possible utilizing accurate dates, times, locations and names of people involved to the extent that you can.

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How may we contact you if we have questions, require additional information or need to inform you of action taken on this incident?

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_