

West Seattle Reign Sports LLC Grievance Form

Must be submitted by 5pm on Monday following the game where the grievance occurred.

Please submit to staff at customerservice@westseattlereign.com or to the on-site director.

Complainant Name: _____

Telephone: _____

Email: _____

Address: _____

Team/Division: _____

Statement of Violation:

West Seattle Reign

Items of Proof:

Witness Names(s):

Witness Phone Number(s):

Offenders Name:

Please circle role of offender(s) below:

Coach

Referee

Parent

Player/Cheerleader

Staff Member

Site Director

Volunteer

Other

Date and site violation occurred: _____

League Representative Signature: _____

Date: _____

West Seattle Reign Sports LLC will review your grievance and will make a ruling within ten (10) days from the date of the grievance report. WSRS LLC reserves the right to determine what, if any, fines, penalties, suspensions, or repercussions shall result from this grievance. Each grievance report will be filed for a maximum of five (5) years from the date of the grievance.

West Seattle Reign