



## Complaint Form

PRINT clearly and complete the form in its entirety  
It's the complainant's responsibility to discuss this with your parent rep, coaching staff, and convenor before proceeding. If you have and no resolution has been made, please proceed.

**\*Brampton Hockey DOES NOT accept anonymous complaints\***

1. Person making the complaint, circle one

Player                  Parent                  Volunteer                  Official                  Employee

First Name	Last Name
Phone Number	Email Address
Full Address	
If you are a player, state your date of birth and full team name	
If you are a parent, state your child's name, date of birth and full team name	



**BRAMPTON HOCKEY INC.**  
8950 McLaughlin Road South "Bldg D". Brampton, Ontario L6Y 5T1  
Phone: (905) 453-3243 Fax: (905) 453-3421  
[www.bramptonhockey.com](http://www.bramptonhockey.com)





2. Name of the person(s) whom you are complaining against

First Name	Last Name
Title/ Role	Name of Team
First Name	Last Name
Title/ Role	Name of Team

3. Particulars of Incident

<p>Please include the following:</p> <ol style="list-style-type: none"> <li>1. Date of Occurrence</li> <li>2. Location of incident</li> <li>3. Names of those involved, including witnesses</li> <li>4. What occurred</li> <li>5. What resolutions were broken</li> <li>6. Remedy/ resolutions you are seeking</li> </ol>





Signature of Complainant

Date



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