

LEBANON WARRIOR YOUTH FOOTBALL LEAGUE

Incident Report

In order to better serve the youth of the Lebanon Warrior Youth Football League, the L.W.Y.F.L. has made this form available to make your comments heard, and for the L.W.Y.F.L. to use as official notification for any incident that may be deemed as inappropriate concerning coaches, players, and spectators due to a breakdown in sportsmanship or due to rules violations.

Parents and coaches are encouraged to use this form to document their concern as well as any incident that may occur.

1. Please print - Fill in all lines

Event Date: _____ Grade Level: _____
 Teams: _____ vs _____
 Name: _____ Daytime Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____

2. Report Topic

_____ Player Ejection _____ Coach Ejection _____ Other Ejection _____ Equipment
 _____ Sportsmanship _____ Facility _____ Injury _____ Praise _____ Other

3. Name(s) of reported persons

| | Coach | Player | Official | Spectator | Team | Other |
|---------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1 _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4. Please provide details explaining the events that resulted in this report. If you need more space, please attach a separate sheet.

Date Filed: _____ Signature: _____

Please mail to: LWYFL - P.O. Box 1114 - Lebanon, OH 45036

For Official Use: Date Received: _____ Action Taken: _____
