

COMPLAINTS FORM

1. Complainant Details (Person Making the Complaint)

Full Name	
Date of Birth (if under 18)	
Address	
Phone	
Email	
Role in Oztag	Player / Parent / Coach / Official / Volunteer / Spectator / Other

2. Respondent Details (person complaint is about)

Full Name (if known)	
Club / Team	
Role	Player / Parent / Coach / Official / Volunteer / Spectator / Other

3. Incident Details

Date of Incident	
Time	
Location / Venue	
Competition / Division	

4. Nature of Complaint (tick all that apply)

<input type="checkbox"/> Abuse of Official	<input type="checkbox"/> Physical Misconduct
<input type="checkbox"/> Verbal Abuse	<input type="checkbox"/> Improper Use of Drugs or Substances
<input type="checkbox"/> Bullying or Harassment	<input type="checkbox"/> Competition Manipulation or Gambling Concern
<input type="checkbox"/> Discrimination or Vilification	<input type="checkbox"/> Social Media Misconduct
<input type="checkbox"/> Child Safeguarding Concern	
Other:	

5. Description of Incident

Provide a detailed description of what occurred. Attach additional pages if required.

6. Witnesses

Name / Contact Details	
Name / Contact Details	
Name / Contact Details	

7. Evidence Provided

Photos / Video / Screenshots / Medical Report / Written Statements / Other	
Please provide details	

8. Previous Action Taken

Has this matter been reported previously	Yes / No
If yes, provide details (Date, to whom, any references)	

9. Desired Outcome(Optional)

Please provide details on the outcome you desire from this complaint.

10. Declaration

I declare that the information provided is true and accurate. I understand complaints are managed in accordance with the relevant policies of the International Tag Federation.

Signature

Date