

El Dorado Jr. Cougars Complaint / Concern Form

Details of Complaint/ Concern

1. Team Involved: ___ Jr. Pee Wee U8 (Football / Cheer)
 ___ Pee Wee U10 (Football / Cheer)
 ___ Jr. Midgets U12 (Football / Cheer)
 ___ Midgets U14 (Football / Cheer)

2. Date/ Time of incident: _____

3. Location: _____

4. Parties involved:

5. Detailed account of information in which Complaint / Concern Form is being filed. Be as precise as possible.

(Continue on back if necessary)

Proposed solution to Complaint/ Concern.

Detail your role in the solution to this Complaint/ Concern.

(Continue on back if necessary)

Contact Information:

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Print Name

Signature

Date

Note: EDJC has a strict 24 hour Cool-off period as described in your parent contract. Do not complete and submit this form until it has been 24 hours after the incident. Once 24 hours has past, you may submit this form to any EDJC board member in person, by email or to PO Box 822, Placerville Ca. 95667