



# Saratoga NFL Flag Football

## Grievance / Compliant Form

*Must be completed by 5pm on the Monday following the game where the grievance/compliant occurred*

*Please submit form to [Saratoganflflag@gmail.com](mailto:Saratoganflflag@gmail.com), 518.928.4788*

Complainant Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Team/Division: \_\_\_\_\_

Statement of Violation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Items of Proof: \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Phone Number: \_\_\_\_\_

Offender's Name: \_\_\_\_\_

Coach  Referee  Player  Staff Member  Volunteer Parent

Other  \_\_\_\_\_

Location (Field #): \_\_\_\_\_

Date: \_\_\_\_\_

*SNFLFF Board of Directors will review your grievance and will provide feedback within 10 days from date of the grievance report. SNFLFF reserves the right to determine if any, suspensions or repercussions shall result from this grievance. Each grievance filed will be filed for a maximum of three (3) years from the date of the grievance.*