



WDNA
Wanneroo Districts Netball Association Inc.

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**COMPLAINT FORM
"Without Prejudice"**

This form is to be completed on incidents occurring within 48 hours of a Wanneroo Districts Netball Association competition, program or event and must be lodged with the Association Manager. No complaints will be accepted unless correct procedure followed.

Date: _____ Division: _____ Time: _____

Teams: _____ vs _____

If the incident is regarding the conduct of a player, please complete the following:

Offending player's team: _____
Offending player's position: _____
Offending players name: _____

If the incident is regarding the conduct of any other person, please complete the following:

Persons Name/Role and Club: _____

ALLEGED OFFENCE:

Please tick appropriate offence, if more than one offence, tick appropriate boxes.

<input type="checkbox"/>	Fighting / striking with a clenched fist.
<input type="checkbox"/>	Striking with an open hand.
<input type="checkbox"/>	Kicking / attempting to kick.
<input type="checkbox"/>	Attempting to strike with a clenched fist.
<input type="checkbox"/>	Racial / discriminatory abuse.
<input type="checkbox"/>	Using abusive, obscene and / or threatening language.
<input type="checkbox"/>	Striking with ball or other object.
<input type="checkbox"/>	Deliberately tripping an opponent.
<input type="checkbox"/>	Deliberately elbowing.
<input type="checkbox"/>	Undue rough play.
<input type="checkbox"/>	Repeated deliberate infringements.

Please answer the following:

1. Was a warning given to the player during the game? Yes No

2. Was the player suspended for a specified period during the game? Yes No

If yes, for how long? (e.g. 3 centres, 3 mins) _____

3. Was the player ordered off for the whole game? Yes No

4. Was the player abusive towards the Officials after the game? Yes No

5. If the matter is referred to the "Complaints Committee" you will be required to appear and give evidence. Are you prepared to attend as requested? Yes No

6. The Board shall decide whether this complaint is dealt with by the Complaints Committee or through Mediation. Are you prepared to attend mediation as requested?

Yes No

Please give specifics of the offence (including word for word verbals or swearing) and list any witness/witnesses. Please remember that a copy of this complaint shall be provided to all parties named in the complaint.

Name: _____ Signature: _____

Contact details (Phone, email) _____

Date: _____ Time: _____

Your Role / status in netball

- Athlete / player
- Parent
- Coach/Assistant Coach
- Spectator
- Official / Umpire
- Administrator (volunteer)
- Other please specify _____

Club Contact Name : _____ **Signature** _____