Phone: 604.737.3084 Web site: www.squashbc.com



4867 Ontario Street, Vancouver, B.C. V5V 3H4

## Squash BC's Incident/Witness Form

This form is to be used to file a complaint or to be used by a witness under any Squash BC policies where a complaint may be filed. When hand printing on form, please be very neat. To type on the form, put your cursor on the line you wish to type on.

Policy under which you are filing this Form:	
Date of Incident:	
Time of Incident:	
Location of Incident:	
Subject of Complaint involved in the incident:	
Name of Complainant/Witness:	
Facts of the incident, (please be neat, concise and a go to next line. For word, don't worry about follow	· · · · · · · · · · · · · · · · · · ·
Each individual who witnessed the incident must se	end in their own original report.
Signature of Complainant /Witness	Date

Please return this form to the Executive Director, Squash BC

E-mail: <u>ExecutiveDirector@squashbc.com</u>

Mail: 4867 Ontario St. Vancouver, BC V5V 3H4

