



Grievance Form

Contact info for person(s) filing the grievance:

Date: _____

Name: _____
 Address: _____
 City, St., Zip: _____
 Home phone: _____ Cell phone: _____
 Work phone: _____
 E-mail : _____

Person(s) filing the grievance against: _____

Date in which it happened: _____

Please answer all of the following questions for each complaint. The use of the form is required.

First, what is the complaint? Please be very specific and concise in presenting the complaint.

Second, describe all actions that you have taken to resolve this issue. Please include all responses to your attempts to resolve this issue.

Third, what remedy are you seeking? Please be very specific in identifying the remedy you are seeking for the complaint.

Name of person(s) you have already contacted or talked about this matter with/Name of contact info of witnesses:

email to info@edmondyouthsports.com
title email "Official Grievance"

Signature