



INCIDENT REPORT

To officially report a fight, rules infraction, serious injury or other grievance use this form.

Submit this report to your ACHA commissioner within 48 hours via email of the incident's occurrence. Based on the report and supporting score sheet and/or video, the commissioner will provide a ruling. The ruling may be appealed to the appropriate rules committee.

Please explain the incident in the space below. Attach additional pages and supporting documentation if needed.

| | | |
|------------------------------------------|----------------|------------------|
| Date of Incident: | Home Team: | Visiting Team: |
| Arena/Location: | | City, State: |
| Person Filling Out Report: | Daytime Phone: | Evening Phone: |
| Title and Team/Affiliation: | Email address: | Mailing address: |
| List additional contacts/witnesses here: | | |