

# Owatonna Lacrosse Association

## Grievance Procedure

Player Name:  Team:

Person Filing Grievance:

Relationship to Player:

Phone:  Email:

Date Grievance Occurred:

### **Details of the Incident (be specific):**

### **Witnesses (if any):**

### **Steps Taken to Resolve the Grievance:**

Date Submitted:  Signature:

*All grievances will be reviewed by the Owatonna Lacrosse Association within 7 business days.*

*All actions taken by OLA will be documented and kept on record.*

*Return completed form via Crossbar or to the designated OLA grievance email address.*