

## MERRILL AREA YOUTH HOCKEY

### DISCIPLINARY COMMITTEE INCIDENT SUBMISSION FORM



Please adhere to the 24hr rule located in the MYHA handbook page 45

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### Submitter Information

(Your contact information will remain confidential within the committee.)

- **Full Name:** \_\_\_\_\_
- **Role (Coach, Parent, Player, Official, Other):** \_\_\_\_\_
- **Phone Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_

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### Incident Details

- **Date of Incident:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_
- **Time of Incident (if known):** \_\_\_\_\_
- **Location (Arena/Rink/Facility):** \_\_\_\_\_
- **Teams Involved (if applicable):** \_\_\_\_\_

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### Individuals Involved

1. **Name:** \_\_\_\_\_ | **Role:** \_\_\_\_\_
2. **Name:** \_\_\_\_\_ | **Role:** \_\_\_\_\_
3. **Additional individuals involved (if any):** \_\_\_\_\_

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### Description of Incident

(Please provide a detailed description of what occurred, including events leading up to the incident, the behavior in question, and any actions taken at the time.)

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(Attach additional pages if needed.)

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## **Witnesses**

(Include names and contact information, if known.)

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## **Supporting Documentation**

- ☐ Video Evidence
- ☐ Written Statements
- ☐ Screenshots (texts, social media, etc.)
- ☐ Other: \_\_\_\_\_

(Please attach any relevant files or documents when submitting this form.)

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## **Desired Outcome or Action Requested**

(Optional – what resolution or disciplinary action are you seeking, if any?)

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## **Acknowledgment**

I affirm that the information provided in this form is accurate to the best of my knowledge and submitted in good faith for review by the Merrill Youth Hockey Disciplinary Committee.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_