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| **INCIDENT REPORT** | **D4** |

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| COMPLETED BY: |  |  | Contact No |
| Date:  |       |  |  |

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| **INFORMATION REQUIRED:** | **ANSWERS / COMMENTS:** |
|  |  |  |  |  |
| 1 | ☐ |  | Date of incident |       |
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| 2 | **☐** |  | Teams |  |
|  |  |  |  |  |
| 3 | **☐** |  | Court |  |
|  |  |  |  |  |
| 3 | **☐** |  | Time slot |  |
|  |  |  |  |  |
| 4 | **☐** |  | Coaches’ names |       |
|  |  |  |  |       |
| 5 | **☐** |  | Club president |       |
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| **PLEASE PROVIDE RELEVANT INFORMATION:** |
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| Incident supported by Club President and lodged with Administrator  |
| Domestic Club President’s signature: |  | Date:  |       |

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| **INCIDENT REPORT** | **D4** |

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| **PROPOSED RESOLUTION TO BE COMPLETED BY THE DOMESTIC DIRECTOR:** |
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| Domestic Director’s signature: |  | Date:  |       |

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| **OUTCOME:** |
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| Signature: |  |  |  |
| Title: | Development Officer |  | V.P. - Basketball |
| Date: |       |  |       |

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| I certify the above resolution has been provided to all parties: |
| Administrator’s signature: |  | Date:  |       |