CAROLINA REGION/USAV Participant/Spectator Behavior Policy Incident Report Form



Tournament Directors should complete this form any time a participant at an event is Expelled from the facility under the provisions of the Participant/Spectator Behavior Policy. Please include as much detail as possible (use additional pages if needed). All witnesses should be provided with a copy of this form and asked to submit to Region as well.

Person Completing Form:	
Your Contact Information (email, phone)	:
Tournament Site (City):	
Facility Name:	
Expelled Individual Name:	
Witness 1 Name:	Witness 2 Name:
Witness contact info:	
(email, phone)	(email, phone)
	g before the decision to expel was made? YES NO
III. Any additional information the Regi	ion may need to know concerning this incident?

Please complete this form within 48 hours after the tournament and fax to Region: (336) 766-3501