Coeur D'Alene Hockey Association
Complaint Form

Complainant: _____
Contact Information: _____
_____
_____

Subject(s) of allegation: _____
Affiliation/Team/Title _____
_____

Specific rule, regulation or policy allegedly violated: _____
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Brief summary of event: _____
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Signature: _____ Date: _____

Once this form is completed, please give it to any member of the CDAHA Executive Board.