

**Attachment 'D'**

**INCIDENT REFERRAL FORM**



TO: AFL SC Football Operations Coordinator

E-mail: Dave.Johnson@afl.com.au

Online: [www.aflsouthcoast.com.au](http://www.aflsouthcoast.com.au) – Resources – Referral

I, the undersigned give notice I wish to refer an incident:-

- (i) which may constitute a Reportable Offence or Breach of Code of Conduct

Round: .....

Match: ..... VS.....

Venue: ..... Date:.....

Players/Officials involved (please identify offending person/s): .....

Type of Infringement: .....

Vicinity on Ground: .....

Quarter: ..... Time of Incident: .....

Other relevant information:

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How do you rate the seriousness of the incident? (1 = Moderate; 5 = Extreme)

1	2	3	4	5
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Print Name: ..... Club: .....(if applicable)

Signed: ..... Dated: .....

Umpire / Umpires Coach / Club Executive / League Official ..... (Specify Role)

This form is to be completed and lodged, along with the deposit in accordance with League By-Laws. If completed online a copy of the deposit receipt should be attached

**League use only:**

Lodged with League on ...../...../..... at .....(time)