

This form should be used in the event of any unsavoury incident occurring during the Match relative to abuse of the Referee by persons playing and watching the game.

The Form should be signed by the individual who took charge of the game and ideally also countersigned by somebody else who was present.

The form should be sent to the Secretary of the League within FIVE days of the completion of the game.

DATE OF MATCH _____

FIXTURE _____ **v** _____

AGE GROUP _____

Details of Incident:

(if you need to continue on a second sheet please attach accordingly)

Referee / Person who took charge of game

Name (please print) _____ signature _____

Witness (please print) _____ signature _____

**PLEASE SEND THIS FORM TO THE SECRETARY; S.M. BIRLEY, 29, TOWNLANDS,
BRADNINCH, EXETER, DEVON, EX5 4QY (within five days of the game).**