



Traveling Basketball Club

Feedback Form

The HLWW Travel Basketball Board strives to provide the highest quality youth sports program for its participants. The HLWW Travel Basketball Program establishes minimum behavior and performance standards for Coaches, Parents, Players and Board positions. The HLWW Travel BB Board established a liaison for each youth group to hear and make rulings on complaints that were not able to be satisfactory resolved at lower levels.

Use the following process when filing a complaint:

1. Discuss the issue with the team coach first; in order to allow for a reasonable conversation, it is expected that parents approach a coach 24 hours after a situation has occurred.
2. If you are still not satisfied, then discuss the issue with your Player Representative; player representative contact information can be found on our home web page at www.hlwwtravelingbasketball.org.
3. If you are still not satisfied and wish to have the matter investigated and for action to be taken by the board, please complete this Feedback Form and send it to Leon Decker.

A liaison member will contact you shortly confirming receipt and may request other information.

Please fill in the info below:

Team Name _____

Your Name & Email: _____ Phone: _____

Complaint for: () Manager/Coach () Player () Parent () Other

1. Please describe how the offender violated the HLWW Travel Basketball Code of Ethics. Please include the name of the person(s) who may have violated the policies and their role(s) in the program. Please indicate any other supporting evidence.

2. Were there witnesses to the incident: () Yes () No; If yes, please have them attach a separate statement.

Witness Name & Email: _____ Phone #: _____

Witness Name & Email: _____ Phone #: _____

Did you contact your child's coach or the Player Representative to report this incident prior to filling out this report? () Yes () No

4. If yes, who did you contact and how was your complaint handled?

BOARD USE ONLY

DATE COMPLAINT FORM RECEIVED: _____

DATE COMPLAINT FORM RECEIVED BY TEAM LIAISON: _____

FINAL DECISION:

() Coach/Player/Parent Suspension: # of Games: _____

() Coach/Player/Parent Expulsion: Effective Date: _____

() Warning _____ Verbal _____ Written

() Other: _____

COMMITTEE CHAIR ACKNOWLEDGMENT:

Chairperson Signature Date

HLWW Travel Basketball Chair ruling acknowledgement

Director/Assistant Director Signature Date

All Program Complaint Forms must be filed for at least (5) years