

EJECTION/INCIDENT REPORT

NAME OF SPORT: _____ DATE OF GAME: _____

LEVEL: V JV F/S BOYS () GIRLS () VISITING SCHOOL: _____
(Circle One) (Check One)

POSITION YOU WERE WORKING: _____ HOME SCHOOL: _____
PARTNER'S NAME: _____

SCORE AT TIME VISITORS _____ WHEN EJECTION
OF EJECTION: HOME _____ TOOK PLACE: _____

FINAL SCORE: VISITORS _____ HOW LONG WAS
HOME _____ GAME DELAYED: _____

NAME AND **SCHOOL** OF PERSON EJECTED (if coach, indicate head or assistant):

WHAT LED TO THE EJECTION?

(Circle if applicable)

RULING: BOOK CIF-SS RULE JUDGMENT

REASON FOR THE EJECTION

LANGUAGE: PROFANITY ABUSIVE PERSONAL HECKLING

PHYSICAL CONTACT: BUMPING PUSHING KICKING STRIKING FIGHTING

ACTION WAS AGAINST: UMPIRE OPPONENT SPECTATOR TEAMMATE

Briefly Describe Incident

Had the ejected person been warned before (circle one)? Yes No

Print your name

Work Phone Number

Home / Cell Phone Number

Within 24 hours of this incident notify your liaison and local unit, then *mail or fax a copy to the appropriate CIF Administrator* at:
CIF-SS 10932 Pine Street, Los Alamitos 90720

phone **562-493-9500**

fax **562-493-6266**