ANCASTER MINOR HOCKEY LEAGUE

Website: www.ancasterminorhockey.com

COMPLAINT FORM

IMPORTANT! Please print neatly

Submit appeal forms with payment attached to either:

1. By Mail to: Ancaster Minor Hockey League, Attention: Vice President, P.O. Box 10003, 27 Legend Court, Ancaster, Ontario L9K 1P2, or

2. In person delivery to: Ancaster Minor Hockey League, Attention: Vice President Deposit in AMHL Mail Box, Morgan Firestone Arena, Jerseyville Road, Ancaster, Ontario

Complainant Surname (Player): _____ Date of Birth: _____ (Day/Month/Year)

Complainant First Name: _____ Division (i.e., Atom) if known: _____

Address; (Incl. #, street name, Lot & Con.): _____

City: _____ Postal Code: _____

Complaint filed by: (Please Print): _____

Contact Information: Tel. (Residential): _____ Tel (Business): _____

Email: _____ Fax (if applicable): _____

Complaint (Describe in sufficient detail):

_____
_____
_____
_____
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_____
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_____
_____

Date: _____ (Day/Month/Year) Signature: _____

Type of Complaint submitted to be heard and Applicable fee payable on filing complaint (circle one):

Written complaint $25.00* In Person complaint $50.00*

*The AMHL board may in its discretion waive the related fee.

PRIVACY STATEMENT: The information requested on this form is required by the Ancaster Minor Hockey League (AMHL) and its executives, employees, coaches, trainers, referees and volunteers) for registration purposes and to administer the rules and regulations of the AMHL and OMHA (as applicable) and provide notification of any upcoming events or other activities. In order to do so, the AMHL, may, if required request proof of a player's identity, address and date of birth.