

OCSJ COMPLAINT FORM

Today's Date _____

Complainant's Name _____

Contact phone number and/or email address _____

Date and time of complaint situation _____

Names (s) of parties involved (including yourself)

Name(s) of any witness(es) _____

Location of OCSJ club event/activity (eg: Hike to Apple Pie Hill)

Nature of the complaint

Resolution _____
