



COMPLAINTS, PROTESTS, & DISPUTES LODGEMENT FORM

This form must be submitted, to Secretary, MBA by the end of the next working day following the day of the incident being protested or at such time as an informal resolution has failed.

Please fill in and tick as appropriate

1. Date of Incident

Location of incident (e.g., Glanville Bowling Club)

Event at which incident occurred (e.g., Pennant Round 5)

Controlling body of the Event (e.g., Bowls SA, Association, Club etc.)
.....

2. Summary of the Protest

- | | | | |
|--|--------------------------|-----------------------------|--------------------------|
| Breach of the Laws of the Sport | <input type="checkbox"/> | Breach of BA/BSA/MBA Policy | <input type="checkbox"/> |
| Breach of the event Conditions of Play | <input type="checkbox"/> | Result of a Match/Series | <input type="checkbox"/> |
| Breach of acceptable behaviour | <input type="checkbox"/> | Member or Club Eligibility | <input type="checkbox"/> |
| Other - please describe | | | <input type="checkbox"/> |

3. Details of the parties involved in the Protest.

(A Party can be a Region/ Association/ Member Club or Club Member)

Who is lodging the Protest? (e.g. Region 15/ASB Association/ GlanvilleBowling Club etc)
.....

Who or what is the Protest against? (e.g. Region 15/ASB Association/ GlanvilleBowling Club etc)
.....

FOR MBA SECRETARY

4. Protest received by **Position**

Informing the organisations/ individuals identified in the Protest of the existence of a Protest against them.

Who was informed?

When were they informed?

Who informed them?

Name Position.....

5 Lodgement Fee: the appropriate fee MUST BE PAID, PROOF OF LODGMENT MUST ACCOMPANY THIS FORM

MBA Banking details are: Bank ANZ BSB 015 310 A/C Number 4633 13337

FOR MBA PRESIDENT OR SECRETARY

Protest or request valid; Hearing Panel will be convened.

Signed **Date**

Protest or request invalid. Signed **Date**

6. Description of the Incident

Time and place of the incident

Outline of the Incident (use another page if necessary)

Desired Outcome of Protest

Witnesses (if applicable)

Witness 1 Name.....Contact Details.....

Witness 2 Name.....Contact Details.....

7. Lodgement of Protest *Region/ Association/ Member Club or Club Member*

By signing below you agree as an authorised representative of.....that all above details are correct and factual to the best of your knowledge and agree to the process as per the MBA Complaints, Protests, Hearings & Appeals Policy.

Name

Signed Date

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Refer to the MBA “Complaints >.....” and “Charges” documents for details