New Zealand Inline Hockey Association Box 18001, Merrilands, New Plymouth, New Zealand

Officials Incident Report



Date of Game:	Time of Game;		Game Number:
Date of Carrie.	Age Classif	ication:	
Venue:			
Home Team:	Awa	ay Team:	
Referee Name:	,		Qual Level:
Deferee Name:			Ought ovels
Referee Name:			Qual Level:
Offense committed:			,
Oliense committed.			
Incident description in detail:	(use other side of page if necessary)	Pen	alty Bench
		 	
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		_	
		Indicate I	ocation of Incident
Players Involved and Penalty	/ Assessed		
Name	Team and Number	Rule Number	& Penalty Assesses
Observations leading up to the	sis reported incident:	-	
Observations leading up to tr	nis reported incident:		
Referee's Signature	Date	e of Report	
Noticide 3 Olymature	Date	on Nepolt	
	fficials Insident Depost along with an		

This Officials Incident Report along with any relevant documents is to be sent by email, post or fax immediately Contact Details are: nz.inline@gmail.com or Box 18001, Merrilands, New Plymouth or Fax (06) 759-8445 and forwarded the regional Discipline Chairperson and League Authorities. A copy of all relevant documentation INCLUDING the scoresheet must be sent with the referee report(s).

Incident details continued			

Officials Report Guidelines

- 1. The purpose of the report is to give an accurate account of what occurred.
- 2. It is important to describe the incident in detail as though the readers of the report did not see the incident, which may be the case.
- 3. Referees must complete his/her own report stating what they saw, not an account of what they saw plus what they heard from others. As both referees are positioned on opposite sides of the rink and looking at different players, then each referees view will be different.
- 4. Referees MUST ensure the report is completed as soon as practicable and in all cases within 24 hours after the completion of the game in which the incident took place to ensure that details are recorded accurately.
- 5. Referees MUST submit their reports individually without consultation with the other game referee of the game where the incident occurred.

Areas to include in report are: -

- Sequence of events leading up to the incident, ie. Boarding, tripping, face-off, protecting goalie, swearing etc.
- How many involved initially and their numbers,
- #5 Blue tripped #23 Red, or
- #5 Blue fell on Red goalie.
- Who was the third player in?
- #28 Red crossed checked #5 Blue, or
- #23 Red pulled #5 Blue from his goalie
- Who swung the first punch?
- #3 blue punched #28 Red for cross-checking team mate
- #5 Blue started fighting with #23 Red.
- Did any goalies leave their crease
- Did any player leave their player bench
- Did any player leave the penalty bench
- Score Sheet completed correctly ie. Match penalty for fighting



New Zealand Inline Hockey Association

Reporting Form for all Allegations of breach/s of the relevant Code of Conduct and acts of vandalism, violence, abuse, dishonest, offensive or any other such behaviours they may bring the sport into disrepute that occurred before, during or after an inline event.

NCIDENT LOCATION	l:		INCIDENT DATE:
	cur in: Competition and provide details below		ation
ETAILS OF THOSE		Olah (ff.lanaan	A.
iame:		Club (If Knowl	1)
JMMARY OF INCIDE	NT Please give specific	details (attach sheets if necessary)	
	CUMENTED VERIFICAT		
vide names and a	ddresses OR copies of p	orinted materials)	
WHOM WAS THIS utify Person	INCIDENT REPORTED	D AND AT WHAT TIME? NAME	PHONE/MOBILE/ADDRESS?
ossible)		MANIL	FIIONE/MODILE/ADDRESS
A Official (identify	/)		
)(: /: - +: (: \			
Officer (identify)			
(identify)			
, , ,			
r (identify)			
was reported t	what was the recolution	n and who may we contact for vei	dispersion 2
was reported v	mat was the resolution	I and who may we contact for ver	ilication:
416, 46a4 46a al	o information is access	ata tuuthful andl-t- t-	
		ate, truthful, and complete to n to co-sign if under 18 years)	
nature:	euge. (Farent/Guardia)		Date:
nature: nt Name:	euge. (Fareni/Guardia)		Date: Phone Numbers:
	euge. (Farenivouardia		

NOTICE TO ATTEND A DISCIPLINARY PANEL

TO:	
	_
Take NOTICE that you are required to attend a Disc	inlinany Panal haaring:
Onat_	•
(date)	(place)
OR	(1.000)
By a teleconference on	at
•	(time)
To participate in the teleconference you will need to	dialand then enter, when asked by
the operator, the following pin number	.
On behalf of	(Referee or Accused Person)
In respect of a report/charge against	
(A copy of the Report is attached)	
The Report/Charges are as follows:	
Rule No:	
Rule No:	
Rule No:	
Further, take notice that if you fail to appear before t	ne Disciplinary Panel, the Disciplinary Panel is
empowered to assess an additional suspension from	
Signed:	(Disciplinary Panel Chairperson)
If there are any questions regarding this notice pleas	se contact me on Tel·

NOTICE TO ADMIT

Report/Charge		
Rule N	0:	_
Rule N	0:	_
Rule N	0:	_
l,	admit the report/char	ge as per the incident
which occurred on	(date) at	(venue) and
accept the decision of	the Disciplinary Panel. In respect of the inc	cident I make the following
·		
	(Cont	inue on separate page if required)
Signed:	(Reported Person)	Dated:
		Dated:
	b or NZIHA Official OR Parent/Guardian/Caregiver)	
This form must be for	warded to the Disciplinary Panel Chairperso	n by
	rs prior to the time set for the Regional Discip	,
•		plinary i affer flearing of flair aff
nour in the case of an	Event Disciplinary Panel Hearing.	
1	the reported/sharged	I norsen having admitted the
I,	•	I person having admitted the
report/charge will /	will not elect to attend the Disciplinary Par	nel. (Please strike out whichever is NOT
applicable)		
The Disciplinary Pane	el Chairperson reserves the right to require the	hat the reported/charged person
attend the Disciplinary	Panel to have his/her case heard, even aft	er submitting a "Notice to Admit".
•		-
Details of Player:		(Address)
-		_(Telephone/Fax Numbers)