



Corrective Action Request

Submitter Information

Name: _____ Date Submitted: _____

Phone: _____ Email: _____

Address: _____ City: _____

State: _____ Zip: _____ Date Occurred: _____

Incident Information

Name/team of offending party: _____

Was there a threat of safety or injury: _____

Was a referee, coach or other Rugby Oregon official notified? If so, who: _____

Nature of Offense (please describe in detail) _____

Form may be submitted to the Rugby Oregon Disciplinary Chair at zimminc@gmail.com.
Form may also be submitted directly to Rugby Oregon's President at jenn@rugbyoregon.com or
Rugby Oregon
4506 SE Belmont Street, Suite 204
Portland, OR 97215

www.rugbyoregon.com