

Citing Complaint Form

This Complaint must be received by the MRU within 48 hours of the completion of the match
Failure to submit it within the 48 hour time limit will result in the Complaint not being considered
Please use this form for any act of foul play against a player which was not detected by the match official during the game.

CITED PERSON			
FIRST NAME:		LAST NAME:	
CLUB/ SCHOOL :		POSITION:	
PERSON CITING			
FIRST NAME:		LAST NAME:	
CLUB/ SCHOOL :			
HOME TEAM :		AWAY :	
GRADE		MATCH DATE :	
MATCH LOCATION:			
VIDEO EVIDENCE	Yes No	WRITTEN SUMBMISSIONS	Yes No

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Please give full details of the foul play (Detail the facts only and do not include any opinion or use emotive language)
Please submit this form to MRU Operations Manager (Martin Brady) within 48 hours of the completion of the match via Email: martinb@manawaturugby.co.nz or Fax: 06 354 1670.