2025-2026 POST EVENT SANCTION REPORT FORM

EVENT INFORMATION - Sanction Number:_____

Name of Competition:_____

Date of Competition:_____

Location of Competition:_____

Name of Club Hosting:_____

Name of Person Hosting:_____

Host Contact: Email:_____Phone:_____

Name of Meet Director:_____

Meet Director Contact:_____Phone:_____

EVENT REPORTING CHECK LIST

Complete List of all Meet Staff & Officials:___

Complete List of all participant Athletes & Coaches:___

Complete List of all third-party vendors/other outside services provided:___

Competition Results:___

Official Protests:___

Event Accident Forms:___

By singing this form, the applicant agrees to submit this Post Sanction Event Report Form within 5 business days of the event's completion to USA Roller Sports National Office. The applicant also acknowledges that failure to submit a Post Sanction Event Report Form will result in the following possibilities of penalties: First Offense - Formal Warning, Second Offense – Sanction Granted with Restrictions and Third Offense – Future Sanctions not granted until the applicant is able to validate event reporting procedures are able to be met.

Host Name:_____Signature:_____

Meet Director Name:_____Signature:_____

Date:_____

Please note that if the MAAPP or SafeSport code policies were violated, the meet director agrees to submit a second report directly to the USA Roller Sports National Office, while also acknowledging mandatory direct reporting procedures specific to issues involving minors, that require a direct report to the US Center for SafeSport and local law enforcement.