

## 2024-2025 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:	
	Phone:
Name of Meet Director:	
	Phone:
EVENT REPORTING CHECK LIST	
Complete List of all Meet Staff & Officials:	_
Complete List of all participant Athletes & C	Coaches:
Complete List of all third-party vendors/oth	er outside services provided:
Competition Results:	
Official Protests:	
Event Accident Forms:	
completion to USA Roller Sports National Office. The Report Form will result in the following possibilities of	s Post Sanction Event Report Form within 5 business days of the event's e applicant also acknowledges that failure to submit a Post Sanction Event f penalties: First Offense - Formal Warning, Second Offense – Sanction Sanctions not granted until the applicant is able to validate event
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.