

UNITED STATES FIGHT LEAGUE CHILD ABUSE REPORTING FORM

The USFL recognizes it can be difficult for an athlete, teammate, friend or family member to report an allegation of misconduct and strives to remove as many barriers to reporting as possible. You may remain anonymous if you wish. However, where appropriate, the investigative process may require further input and anonymous reporting may make it difficult for the Authorities to move forward with an investigation.

A report of abuse, misconduct or policy violation that is malicious, frivolous or made in bad faith is prohibited. Such reports will be considered a violation of the USFL's policies and grounds for disciplinary action. Depending on the nature of the allegation, a person making a malicious, frivolous or bad-faith report may also be subject to civil or criminal proceedings.

Please return this document to:

United States Fight League P.O. Box 451 Lake Forest, CA 92630

Email report to: jon@fightleague.org

Thank you for doing your part to ensure the safety and well-being of the athletes of the USFL.

PERSON BEING REPORTED		
Please provide as much information	n as possible about the person you are reporting.	
*First Name:		
de la companya de la		
*Position or Role		
Age or Approximate Age:		
Gender: Male Fe	male	
ALLEGED MISCONDUCT INFOR	MATION	
Please provide as much specific info	ormation as you are able.	
*Type of Misconduct (Select All That	t Apply):	
Bullying	Emotional	
☐ Hazing	Physical	
Harassment	Sexual	
Other		
Other*Location that the incident(s) took p Write <i>Unknown</i> or city, state, specific locati		
*Location that the incident(s) took p Write <i>Unknown</i> or city, state, specific locati	ion, etc.	
*Location that the incident(s) took p Write <i>Unknown</i> or city, state, specific locati *Date(s) or Approximate Date(s) of N	Misconduct:	
*Location that the incident(s) took p Write <i>Unknown</i> or city, state, specific locati *Date(s) or Approximate Date(s) of N *Description of Alleged Misconduct:	ion, etc Misconduct:	

VICTIM OR VICTIMS If you are the victim and wish to remain anonymous, you may do so. In this case, please enter your name as Anonymous. You may also be unaware of who the victim is. In this case, please enter "Unknown." *First Name (or *Anonymous* or *Unknown*):_____ *Last Name (or *Anonymous* or *Unknown*): Age or Approximate Age: _____ Male Female Gender: Additional Information: _____ Fill this section out if additional victims are involved. *First Name (or *Anonymous* or *Unknown*):_____ *Last Name (or *Anonymous* or *Unknown*): Age or Approximate Age: _____ Male Female Gender: Additional Information: _____

INDIVIDUAL(S) WHO MAY HAVE ADDITIONAL INFORMATION

List anyone who may be able to provide *additional information* regarding the alleged offense. We will not identify you when we contact these individuals.

First Name:
Last Name:
Phone: (
E-mail Address:
NGB/USOC/Club Affiliation (or <i>None</i>):
First Name:
Last Name:
Phone: (
E-mail Address:

REPORT SUBMITTED BY

You may remain anonymous if you wish. However, providing your information will make a swift and effective investigation more possible. To the extent permitted by law, and as appropriate, the USFL will keep this report and the complainant's name (upon request) confidential and not make public the names of potential victims, the accused perpetrator and the person who reported this incident of misconduct.

Regardless of outcome, the USFL will support the complainant(s) and his or her right to express concerns in good faith. The USFL will not encourage, allow or tolerate attempts from any individual to retaliate, punish, allow or in any way harm any individual(s) who reports a concern in good faith. Such actions against a complainant will be considered a violation of Federal SafeSport policies and grounds for disciplinary action.

*Last Name (or Anonymous or Unknown): Phone: () E-mail Address: Relationship to Victim: Self	*First Name (or <i>Anonymous</i> or <i>Unknown</i>):	
Relationship to Victim: Self Other Family Member Club Member Prefer Not to Say	*Last Name (or <i>Anonymous</i> or <i>Unknown</i>):	
Relationship to Victim: Self Other Family Member Club Member Prefer Not to Say	Phone: ()	-
Self Parent/Guardian Other Family Member Friend or Acquaintance Club Member Coach or Volunteer Prefer Not to Say	E-mail Address:	
	Other Family Member Club Member Prefer Not to Say	Friend or Acquaintance Coach or Volunteer
Please provide any other information that you feel would be helpful to an investigation of the illeged offense you have reported.	Please provide any other information that you Illeged offense you have reported.	
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