



EDMONTON
TRIATHLON
ACADEMY

**ABUSE & HARASSMENT
COMPLAINT FORM**

Abuse & Harassment Complaint Form

The Edmonton Triathlon Academy (ETA) takes any instance of abuse very seriously and wishes to give your concerns the utmost attention. Please be as specific as possible with witness and/or any other type of evidence in order to substantiate the claim being made. Once this form has been submitted, the Executive Director and the Board of Directors (BOD) will review the case and respond within one month.

Please note that a \$100 deposit will be required when the form has been submitted. If upon review of the claim, the BOD determines that an investigation is warranted, the ETA will reimburse the \$100 deposit to the complainant.

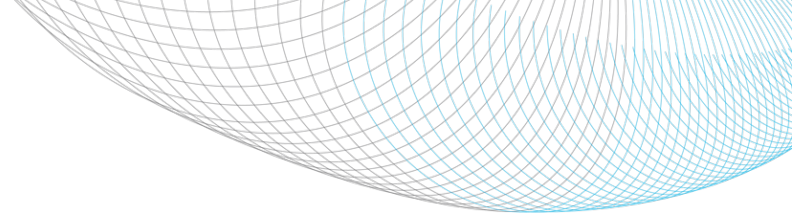
Upon review, the BOD will elect 3 members (they will not have been a part of the claim in any shape or form) to decide if the claim has merit and should be investigated.

If the claim is deemed to be serious enough, the Select Committee (SC) will contact you to arrange a conference call in order to ask questions and you may also give a further statement at this time. The SC will also contact other individuals involved to get the full understanding of the events that occurred.

The SC will then proceed to discussions as a committee and decide what action to be taken in accordance with the ETA Bylaws found on the ETA website. Individuals at fault may receive a 1-year ban, a 4-year ban or a lifetime ban of their ETA membership and may be recommended for suspension by the national and international governing body of triathlon.

The decision will be given within a week of all interviews being concluded and the SC will notify the individual at fault and the other individuals involved of the case.

The decision of the SC is final and is not open to appeals through the ETA.



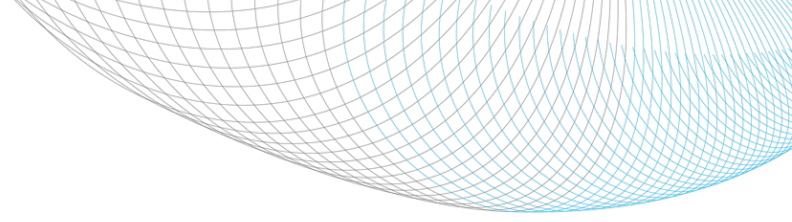
CONTACT INFORMATION

First Name:	Last Name:
Address:	City:
Postal Code:	Home Phone:
Work Phone:	Mobile Phone:

INCIDENT DETAILS

Location:	Time:
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Please describe the circumstances that led to the incident:



ETA REPRESENTATIVES INVOLVED IN THE INCIDENT

Name:

Position/Title:

If ETA Staff or Board of Directors were involved, how did they mediate the situation?

Please describe the incident of harassment or abuse that occurred:

Additional Comments:

Name:

Date:

Signature:

Date of Approval: July 6, 2018