

***APPENDIX C:
REQUEST of HEARING FOR
DISCIPLINARY***

Please attach copies of both game rosters to your Hearing Request

A. Individual / Organization Requesting the Hearing:

Affiliation: _____

Address: _____

Contact Name: _____

Contact Phone: _____

Email: _____

B. Opposing Individual / Organization Requesting the Hearing:

Affiliation: _____

Address: _____

Contact Name: _____

Contact Phone: _____

Email: _____

C. Match Number:

Date: _____ Time: _____

Location: _____

D. Please Describe the Claimed Errors:

NSYSA Operating Procedures

E. List Rules or Procedures You Claim Were Violated, Including Rule/Procedure Numbers:

F. Please State Briefly the Desired Resolution:

The request for hearing must be submitted within 48 hours of the event being protested. See NSYSA Youth Soccer Operating Procedure Game Protest – Article 13, Section F; Administration

I hereby certify that a true and correct copy of this Request of Hearing has been sent to:

Northwest Sound Youth Soccer Association
Attention: Disciplinary Committee
PO Box 1142
Silverdale, WA 98383

Date: _____ Time: _____ AM / PM

I further certify that a true and correct copy of this Request of a Request for Hearing has been sent to the Disciplinary Committee Chairman via email: disciplinary@NSYSASoccer.org

Date: _____

Signature of requester: _____