

NIAA EJECTION REPORT

This report must be submitted to the NIAA office within 24 hours after a game in which a player, coach, fan or any other person has been ejected. This form must be complete, giving full name, # (if applicable), and a brief explanation of the incident.

DATE OF CONTEST: _____ GAME START TIME: _____

HOME TEAM: _____ VISITOR: _____

LEVEL OF CONTEST: BV (ex: JV Boys) PARTNER(S): _____

Name (& #) of (Player / Coach) Ejected:
(circle one) _____

Team: _____

Give brief description of incident. (ie..when ejection occurred and what led up to it.)

In your opinion, was this offense:

- _____ Too Prolonged
- _____ Very Offensive or Violent
- _____ Was Ejected Person Previously Warned?

Reporting Official's Signature: _____

FAX NUMBER (775) 688-6466

PLEASE FAX THIS REPORT TO THE NIAA OFFICE NO LATER THAN 24 HOURS AFTER AN EJECTION OCCURS.