



Freestyle Canada - Safe Sport Incident Report

Welcome

Welcome to the secure, online complaint intake form (Form) for Freestyle Canada. This Form allows you to make a complaint to the Freestyle Canada Independent Third Party (ITP) regarding a violation of the Universal Code of Conduct to Prevent and Address Maltreatment in Sport (UCCMS), FC/Member/PSO Code of Conduct or any other Safe Sport matter. Your submission will be strictly confidential and the information you provide will only be accessible by Freestyle Canada's ITP

We recognize that you may be making your complaint or report about unpleasant, upsetting, and/or disturbing experiences or events. While completing this Form, you will be asked to recount details of that experience, which can cause emotional distress. We recommend that you complete this Form somewhere private where you feel safe. If you require support as you complete this Form, we encourage you to contact Freestyle Canada's Independent Third Party, Gord Hopper at 778-228-4367 or the Abuse-Free Sport Helpline at 1-888-837-7678.

IMPORTANT NOTE: Who can I submit a complaint or report about?

After you submit this Form, The Independent Third Party will determine who has the authority to administer your complaint or report (FC/PSO/Club)

Instructions For Completing This Form

To complete the Form, all fields are required.

If you require more space than the form allows, please include the additional information in an email and link it to the title of the respective question/box.



Submitter Information

First Name:

Last Name:

Province/Territory:

Email:

Phone Number:

Preferred Method of Communication:

Safe Sport Incident Report

Organization:

What is your involvement in the conduct issue being submitted? (I.e. it happened to me, it happened to a family member, I witnessed it, etc.)

Who is this complaint against?

What approximately was your age (or the age of the impacted person, if not you) when the prohibited behaviour began?

Is there anything else you think the Independent Third Party should know about you (or the impacted person) in order to Appropriately deal with your submission?

What organization within Freestyle is the Respondent (person who is alleged to have committed the prohibited behaviour) a member of?

What is the highest level of sport that the Respondent is or has been involved in? (I.e. provincial, national, club, etc.)



Which best describe(s) your role (or the role of the impacted person, if not yourself) in Freestyle Canada at the time of the conduct violation?

If the complaint proceeds, the Respondent will receive a copy of this form, in whole or part. If there is information you will provide that you wish to keep confidential from the Respondent, please mark this box with an "X" and the Independent Third Party will support that.

The information in this section may be required to be shared by the Independent Third Party, in whole or in part, with the Respondent. You will be notified before that occurs

Is as much detail as possible, please describe the prohibited behaviour you are reporting. Please tell us what happened, who was involved when it happened, and where it happened. Please tell us about your role and the role of the person or people involved in the prohibited behaviours (you will have a separate opportunity later in the form to describe the impact of the behaviour, should you wish to do so).

Please tell us what happened:

To the best of your knowledge, When did the prohibited behaviour most recently occur:

Did anyone witness the prohibited behaviour?

Do you believe the prohibited behaviour may be, at least in part, related to any of the following grounds? Choose all that apply

- | | | |
|--------------------------------------|-------------------------------------|---|
| <input type="radio"/> Race | <input type="radio"/> Color | <input type="radio"/> Sexual Orientation |
| <input type="radio"/> Sex | <input type="radio"/> Age | <input type="radio"/> National or Ethic Origin |
| <input type="radio"/> Marital Status | <input type="radio"/> Religion | <input type="radio"/> Gender Identity or Expression |
| <input type="radio"/> Disability | <input type="radio"/> Family Status | <input type="radio"/> N/A |
| <input type="radio"/> Unknown | <input type="radio"/> Unsure | |



Which best describes the role of the Respondent (person who is alleged to have committed the prohibited behaviour?)

What is the role of the Respondent as it relates to the impacted person? (head coach, teammate, etc.)

To the best of your knowledge, is the Respondent currently a minor?

List any other individuals involved. Please include as much information you can provide:

Is there anything you wish to share or clarify about the parties you have listed, please do so here:

Have you or someone else attempted to resolve this issue?

Have you reported this issue to any other organization?



If you wish, please describe the impact of this prohibited behaviour on you

What are you hoping will happen as a result of your submission?

Do you believe the Respondent is in a position to continue to harm the identified impacted person or others?

Please describe the reason for your belief regarding the risk of continued harm, if possible:

Can you think of any safeguards you would like to have in place to make you and others feel safe while the Independent Third Party reviews your case?



Acknowledgement

NOTE REGARDING LEGAL DUTY TO REPORT: Depending on the applicable provincial/territorial laws, the Independent Third Party may be obligated to contact relevant law enforcement officials and/or child welfare authorities regarding any applicable Complaint. (This duty varies by province/territory but generally relates to abuse of children/teens). You may also have a legal duty to report to police. Submitting this Form does not discharge any legal duty to report policy. Submitting this Form does not discharge any legal duty to report you may have under applicable legislation. Check the laws of your province/territory to understand your duty to report.

Please email this form to: ITP.Freestylecanada@gmail.com

Date Submitted: