

# 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.

# If the complaint proceeds, the Respondent will receive a copy of this form in whole or in part. Please check one of the two boxes:

I am comfortable with who the complaint is against (the "respondent") receiving a copy of this complaint form.

I do not want all of this information shared with the respondent. In this case the Independent Third Party will work with you to clarify what information you want to remain confidential.



# **Submitter Information**

First Name:			
Last Name:			
Province/Territory:			
Phone Number:			
Email:			
Preferred Method of Communication:			
Safe Sport Incident Rep	ort		
Which Freestyle organizat	ion are you with?		
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 we the age of the impacted you) when the prohibit began?	d person, if not		
Is there anything else y Independent Third Par about you (or the impa order to appropriately submission?	ty should know acted person) in		



What organization within Freestyle is the Respondent (person who is alleged to have committed the prohibited behavior) 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?			
In as much detail as possible, please describe the prohibited behavior 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 behaviors (you will have a separate opportunity later in the form to describe the impact of the behavior, should you wish to do so).			
Please tell us what happened, who was in Please tell us about your role and the roll behaviors (you will have a separate oppo	nvolved when it happened, and where it happened. e of the person or people involved in the prohibited		
Please tell us what happened, who was in Please tell us about your role and the roll behaviors (you will have a separate oppo	nvolved when it happened, and where it happened. e of the person or people involved in the prohibited		
Please tell us what happened, who was in Please tell us about your role and the role behaviors (you will have a separate opposition behavior, should you wish to do so).	nvolved when it happened, and where it happened. e of the person or people involved in the prohibited		





# 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 behavior 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?



## **Acknowledgment**

#### 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 <a href="mailto:ITPcomplaints@gmail.com">ITPcomplaints@gmail.com</a>

ite Submitted:
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