



Basketball Victoria

Report Form

REPORTED PERSON/TEAM _____ No. _____ TEAM _____
player/coach/spectator/other

DATE OF MATCH _____ TIME _____ ASSOCIATION _____

OFFENCE WITH WHICH PERSON/TEAM CHARGED (TICK APPROPRIATE BOXES)
TICK "A" FOR AN OFFENCE AGAINST A PERSON OTHER THAN AN OFFICIAL
TICK "B" FOR OFFENCE AGAINST AN OFFICIAL

<input type="checkbox"/> A <input type="checkbox"/> B ATTEMPT TO ELBOW (10*)(52*)	<input type="checkbox"/> A <input type="checkbox"/> B ATTEMPT TO KICK (10*)(52*)	<input type="checkbox"/> A <input type="checkbox"/> B ATTEMPT TO STRIKE (10*)(52*)
<input type="checkbox"/> A <input type="checkbox"/> B ATTEMPT TO TRIP (10*)(52*)	<input type="checkbox"/> BRING B'BALL INTO DISREPUTE (19*)	<input type="checkbox"/> CAUSE DAMAGE (16*)
<input type="checkbox"/> CAUSE INJURY (16*)	<input type="checkbox"/> DISPUTE DECISIONS (6*)	<input type="checkbox"/> A <input type="checkbox"/> B ELBOWING (20*)(LIFE*)
<input type="checkbox"/> ENDANGER WITH BLOOD ETC (LIFE*)	<input type="checkbox"/> FIGHTING (20*)	<input type="checkbox"/> GROSS BREACH OF CODE (6*)
<input type="checkbox"/> A <input type="checkbox"/> B KICKING (20*)(LIFE*)	<input type="checkbox"/> A <input type="checkbox"/> B OBSCENE GESTURE (10*)(20*)	<input type="checkbox"/> A <input type="checkbox"/> B OFFENSIVE LANGUAGE (10*)(20*)
<input type="checkbox"/> PARTICIPATE WHILE SUSPENDED (2-5*)	<input type="checkbox"/> A <input type="checkbox"/> B PUTTING IN FEAR (52*)(104*)	<input type="checkbox"/> A <input type="checkbox"/> B SPITTING (20*)(52*)
<input type="checkbox"/> A <input type="checkbox"/> B STRIKING (52*)(LIFE*)	<input type="checkbox"/> A <input type="checkbox"/> B THREATENING (52*)(104*)	<input type="checkbox"/> A <input type="checkbox"/> B TRIPPING (10*)(52*)
<input type="checkbox"/> TUNNELLING (104*)	<input type="checkbox"/> UNSPORTSMANLIKE BEHAVIOUR (6*)	

(* maximum penalty 1st for A offences and 2nd for B offences)

REFEREES NAME _____

UMPIRE _____

SCORER _____

TIMEKEEPER _____

