

MATCH OFFICIAL ABUSE LEVELS 5 AND BELOW



To be completed and returned to **CB Discipline Secretary and Referee Society Discipline Officer**

AS SOON AS POSSIBLE AND BY NO LATER THAN 9AM ON THE SECOND DAY FOLLOWING THE MATCH

Please ensure **ALL** fields are completed

Please e-mail as an attachment

Contact details for the CB Discipline Secretaries are available [here](#)

Name (if known):	
Club:	
Role:	

League/Competition:		Date:	
---------------------	--	-------	--

Home Team	Final Score	Away Team

Nature of Abuse:			
Period Incident Occurred:		Elapsed Time in Half:	
Video:	Yes	No	

WITNESSES WHO MAY BE PREPARED TO SUBMIT STATEMENT AND GIVE EVIDENCE IF REQUIRED			
Name	Role	Email	Telephone

Detailed report of the incident

--

Name:		Role:	
Referee Society <small>(if applicable)</small>		Contact details <small>(Your own or Referee Society contact)</small>	
Date:		Signature:	

Please note that this form will be included in any hearing bundle that is shared with the Club. If you do not wish your e-mail address to be shared, please insert an address for the Referee Society through which you can be contacted.

The RFU Rose and the words 'England Rugby' are official registered trade marks of the Rugby Football Union and are subject to extensive trade mark registration worldwide.