**IDAHO DISTRICT 2 LITTLE LEAGUE**

**INCIDENT / EJECTION REPORT**

DATE OF GAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VISITING TEAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GAME LOCATION:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOME TEAM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DIVISION OF PLAY:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EJECTED PERSONS POSITION: \_\_\_ MANAGER \_\_\_ COACH \_\_\_\_ PLAYER

EJECTED PERSONS NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TEAM:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LOCATION OF INCIDENT: \_\_\_ ON FIELD \_\_\_ IN DUGOUT \_\_\_ NO EJECTION

REPORTING UMPIRES NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLATE:\_\_\_ FIELD:\_\_\_

NAME OF OTHER UMPIRE(S):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESCRIBE THE INCIDENT THAT OCCURRED AND YOUR SUBSEQUENT ACTIONS:

(Include pertinent details concerning language, gestures, thrown equipment, or physical contact)

DESCRIBE ANY AFTER EFFECTS THAT FOLLOWED:

(Refusal to leave, unruly fans or bench, confrontations)

TIME/DATE THIS INCIDENT WAS FIRST

REPORTED TO THE LEAGUE: \_\_\_\_\_\_\_\_\_\_\_\_ FAX \_\_ PHONE \_\_\_ IN PERSON \_\_\_ WRITTEN \_\_\_

DATE THIS REPORT WAS SENT: \_\_\_\_\_\_\_\_\_\_

SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WITNESSED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSITION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACTION TAKEN BY LEAGUE:

The Umpire Shall Report To The League Presidents Within Twenty-Four (24) Hours After The End Of A Game All Violations Of Rules And Other Incidents Worthy Of Comment.