

Realms Arbitration Committee Complaint Form

Date of Incident: _____

Location (Event) Where Incident Occurred: _____

Event Holder(s) for the Event Where the Incident Occurred:

Individual(s) Being Reported: _____

Specific Rule(s) That Was Broken: _____

Witnesses (with contact information if available): _____

Description of incident: _____

To the best of your knowledge was the violation reported? If yes, to who? Are you aware if any action was taken? If yes, what? _____

What if any consequence would you like to see the Arbitration Committee impose in regards to this complaint? _____

Complainant's Name: _____ Date of Complaint: _____

Complainant's Contact Information: _____

I, _____, hereby submit this formal complaint to the Arbitration Committee for review. I affirm that I have honestly disclosed all related information I am aware of about this incident above. I am aware I cannot rescind this complaint after filing. I understand if I do not agree with the Arbitration Committee's findings I have the right to request an emergency meeting of the EHC.

Complainant's Signature: _____ Date: _____

Type of Complaint:

Game Rule Violation: _____

Site Rule Violation: _____

Code of Conduct Violation: _____

Event Holder Ethics Violation: _____

Other (Explain): _____