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| **SWAT FORMAL SUGGESTION/COMPLAINT FORM** | | | | | | |
|  |  |  |  |  |  |  |
| Person Submitting the Compliant |  |  |  |  |  |  |
| Relationship to the SWAT Swimmer |  |  |  |  |  |  |
| SWAT Swimmer |  |  |  |  |  |  |
| Group/Coach |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Date of the Incident |  |  |  |  |  |  |
| Date Reported |  |  |  |  |  |  |
| Person Who Received Report |  |  |  |  |  |  |
| Suggestion/Compliant |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
| Have you discussed this matter with your childs immediate coach? YES NO | | | | | |  |
| Have you discussed this matter with Head Coach Natalie? YES NO | | | | | |  |
| If YES on either, when and what was the outcome? | | |  |  |  |  |
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| \* You may attach additional information to this form for us to review, but all suggestions and/or compliants must be accompanied by this form. Email form to : [swatboard@spokanewaves.org](mailto:swatboard@spokanewaves.org) | | | | | | |