Baseball SA

Report Form

|  |  |  |  |
| --- | --- | --- | --- |
| Date of the game |  / /  | Home Team |  |
| Division |  | Visiting Team |  |
|  |  |  |  |
| Reported Player |  | Team |  |
| Charge Code(s) |  |
|  |  |  |  |  |
| Was a warning given? | Yes / No | Did an ejection occur? | Yes / No |
|  |  |  |  |  |
| Reporting Umpire |  | Reporting Umpire’s position | Plate Umpire / Base Umpire |

**Game situation at the time of the incident**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Innings |  | Outs |  | Score |  | In favour of |  |

|  |
| --- |
| **Describe the incident that occurred and your subsequent action***Include pertinent details concerning language, gestures, thrown equipment or physical contact* |
|  |

|  |
| --- |
| **Describe any after affects that followed** |
|  |

|  |
| --- |
| **Crew Chief / Partner’s comments regarding this incident** |
|  |

|  |  |  |
| --- | --- | --- |
| When was this incident first reported to the State Director of Umpiring | Date |  |
| Time |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signed | Reporting Umpire |  | Date |  / /  |
| Signed | Crew Chief / Partner |  | Date |  / /  |