



CENTRAL FLORIDA UMPIRES, INC.

BASEBALL - SOFTBALL - ONE TEAM FOR THE GAME

16720 Appaloosa Trail, Montverde, FL 34756 | davecfu1@gmail.com | 407-765-0269 | centralfloridaumpiresinc.com

Grievance Form

Completed grievance forms must be submitted to the Grievance Committee Chairman.

FILLABLE FORM

I. Complainant Information

Name

Email Address

Address

Work Phone

Home Phone

Other Phone

CFU Primary Member

☐ Yes

☐ No

If no, primary association

II. Complaint Filed Against (if applicable)

Name

III. Allegations

Nature of Complaint

Synopsis of Complaint

Use this section to summarize the facts, dates, names, locations, and any relevant supporting details.



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Witnesses and affirmation statement.

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IV. Witnesses (if applicable)

Add available contact information

Witness 1 Name

Address

Work Phone

Home Phone

Other Phone

Witness 2 Name

Address

Work Phone

Home Phone

Other Phone

Witness 3 Name

Address

Work Phone

Home Phone

Other Phone

V. Affirmation Statement

I,

, do hereby affirm that the factual allegation(s) made by me on the first page of this complaint form is (are), to the best of my knowledge and belief, true and based on fact.

Complainant Signature