

OKUN FIELDHOUSE BASKETBALL CONFLICT RESOLUTION POLICY

(Your Conflict Form will only be valid if this form has also been submitted.)

In-Season Conflict Reporting Policy and Procedures: Once the schedule is released, **we do not attempt a reschedule unless it is to avoid a forfeit.** Based on the flexibility of the schedule, a reschedule may be possible. Please see below for instructions.

If your team becomes aware of a conflict after the schedules have been released, email stephanie.chase@jocogov.org with the following:

1. Sport
2. Team Gender AND Grade AND Division
3. Team Name
4. Conflict Date and Time

If reporting with more than 24 hours' notice, the original game will be removed from the schedule and a reschedule attempted. If reporting within 24 hours, the game will be forfeit as a reschedule will not be possible.

*** Friday/Saturday/Sunday/Monday game reschedule requests must be made by 12:00pm Thursday at the very latest.**

In-Season Conflict Resolution Policy and Procedures: The team reporting the conflict will be given the contact information of the opponent. It is the responsibility of the reporting coach to follow the instructions listed here.

1. Follow the initial Conflict Reporting instructions above
2. Wait for response from the League Coordinator.
3. Contact your opponent.
4. Compile a list of available dates for both teams.
5. Contact the League Coordinator for date approval. If denied, revert to step 3
6. Receive Confirmation email and updated schedule from the League Coordinator.

If the reporting team submits a reschedule date that has not been approved by the opponents, or if a reschedule date cannot be found, the reporting team will suffer a loss via forfeit and the opponent will receive a win via forfeit.

The schedule posted to www.kcusssasports.com is always the most up to date schedule.

Removed games will be listed in the "Pending Reschedules" section of your schedule; the original game will not be played.

OKUN FIELDHOUSE BASKETBALL CONFLICT RESOLUTION FORM

This form must be submitted at the time of registration.

| | |
|--------------|-------|
| Team Name | _____ |
| Gender | _____ |
| Grade | _____ |
| Manager Name | _____ |
| Cell Phone | _____ |
| Email | _____ |

I understand the In-Season Conflict Reporting Policy and the In-Season Conflict Resolution Policy above and I give JCPRD the permission to distribute my email address and phone number to any opponent reporting a conflict.

Print Name _____ Sign Name _____