USTA PACIFIC NORTHWEST — Code of Conduct Violations

One copy of this completed form goes to the player; one copy goes to the Tournament Director; one copy must be emailed to _____ within____ days of the event.

Player Name: _____ Player's Section:_____

Date of Birth: _____ USTA Membership #: _____ Age Division: _____

Tournament Name and City: _____

Tournament Dates: _____ Tournament Phone: _____

Tournament Referee: _____ Referee Phone: _____

Description of Point Penalty System Code Violation(s): *2 Suspension Points Levied for each Code Violation (see Item 2a on reverse side)

Date	Draw	Code Violation(s)	Points Levied*	Description of Violation(s)
	___Sg ___Cons ___Db	___Point ___Game __Default		
	___Sg ___Cons ___Db	___Point ___Game __Default		
	___Sg ___Cons ___Db	___Point ___Game __Default		
	___Sg ___Cons ___Db	___Point ___Game __Default		

Description of *Other* Suspension Points Levied Against Player: (see reverse side [Items 2b-g] for table of Suspension Points)

Date	Description of Player Misconduct	Points Levied

Official/ Referee Signature: _____ Date: _____