



## LGSA Conflict Resolution Form

This completed, confidential form will be reviewed and discussed at the next scheduled board meeting. The Board will then provide a formal reply to the request.

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Phone number \_\_\_\_\_ Email address: \_\_\_\_\_

Please outline the concern(s) which resulted in your decision to initiate this process.

Is there a rule/policy/bylaw that you believe applies or has been violated? If so, please explain.

What steps, if any, have already been taken to resolve this issue? What were the results?

What action are you requesting from the board?

Please submit this form to the Vice President via email at [vicepresident@lincolngirlssoftball.org](mailto:vicepresident@lincolngirlssoftball.org)  
OR Associate Vice President at [AVP@lincolngirlssoftball.org](mailto:AVP@lincolngirlssoftball.org) AND the Secretary via email at [secretary@lincolngirlssoftball.org](mailto:secretary@lincolngirlssoftball.org)