

**DECISION
of the
USTA LEAGUE CHAMPIONSHIP GRIEVANCE COMMITTEE**

TO: _____

FROM: Chair, Championship Grievance Committee

RE: Name/Title against whom Grievance was filed: _____

Date Grievance Filed: _____ **Type of Grievance:** _____ **League Division:** _____

NTRP Level: _____ **Team Name:** _____ **Team Captain:** _____

Championship Level: _____ **District** _____ **Area** _____ **Sectional** _____ **National**

GRIEVANCE COMMITTEE DECISION:

_____ **Grievance Denied/Dismissed** _____ **Grievance Affirmed** _____ **Penalties Imposed**

STATEMENT:

Any party to this Grievance who is considering an appeal of this decision should familiarize themselves with Section 3.04 of the USTA League Regulations.

***Parties involved in this Grievance have until the following date and time to file a written appeal:**

Date: _____ **Time:** _____

Hearing held by Grievance Committee for this Grievance: _____ **Yes** _____ **No**

***Parties involved in this Grievance have until the following date and time to request, in writing, a hearing before the Grievance Appeal Committee if one was not held by the Grievance Committee:**

Date: _____ **Time:** _____

Committee Chair (signature): _____

Committee Chair (printed): _____

Committee Member (printed): _____

Committee Member (printed): _____

Date: _____ **Time:** _____

**DECISION
of the
USTA LEAGUE CHAMPIONSHIP GRIEVANCE APPEAL COMMITTEE**

TO: _____

FROM: Chair, Championship Grievance Appeal Committee

RE: Name/Title against whom Grievance was filed: _____

Date Grievance Appeal Filed: _____ **Type of Grievance:** _____ **League Division:** _____

NTRP Level: _____ **Team Name:** _____ **Team Captain:** _____

Championship Level: _____ **District** _____ **Area** _____ **Sectional** _____ **National**

GRIEVANCE APPEAL COMMITTEE DECISION (Re: Decision of Grievance Committee):

_____ **Affirmed** _____ **Modified** _____ **Rejected** _____ **Remanded**

STATEMENT:

All parties to this Grievance should familiarize themselves with Section 3.04B of the USTA League Regulations.

*The decision of the Grievance Appeal Committee is final and binding with the exception of a suspension of an individual or team for 12 months or more by any Local, District/Area or Sectional Grievance Appeal Committee. Refer to USTA League Regulation 3.04B(4).

_____ This Grievance Appeal Decision includes a suspension of 12 months or more by a District/Area or Sectional League Championship Grievance Appeal Committee and the party(ies) so suspended has until the following date and time to file a written appeal to the National League Grievance Appeal Committee:

Date: _____ **Time:** _____

Committee Chair (signature): _____

Committee Chair (printed): _____

Committee Member (printed): _____

Committee Member (printed): _____

Date: _____ **Time:** _____