



RULES MISAPPLICATION REPORTING FORM

YOUR NAME:		TODAY'S DATE:	
PHONE NUMBER:		E-MAIL ADDRESS:	
YOUR POSITION:		SCHOOL OR ORGANIZATION:	

TASO DIVISION					
<input type="checkbox"/> BASEBALL	<input type="checkbox"/> BASKETBALL	<input type="checkbox"/> FOOTBALL	<input type="checkbox"/> SOCCER	<input type="checkbox"/> SOFTBALL	<input type="checkbox"/> VOLLEYBALL

GAME INFORMATION	
GAME DATE:	
GAME LOCATION:	
HOME TEAM:	
VISITING TEAM:	
LEVEL OF GAME:	
TASO CHAPTER:	

PLEASE LIST RULE(S) THAT YOU BELIEVE WERE MISAPPLIED

PLEASE DESCRIBE IN DETAIL THE FACTS OF THE PLAY (INCLUDE TIME, QUARTER, MATCH NUMBER, INNING, ETC)

IS VIDEO AVAILABLE?	
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If so, please send to: Texas Association of Sports Officials
1221 West Campbell Road
Suite 141
Richardson, Texas 75080

Or contact us to transfer electronically