



ARKANSAS SOCCER ASSOCIATION

APPEALS & DISCIPLINE REQUEST

Please use this form to submit a rules violation to the Arkansas Soccer Association Appeals and Discipline Committee.

Date: _____

Submitted by: _____

Contact information for person submitting the request _____

Please provide the following information:

1. Person/club that is accused of violating the rule.
2. The actual rule that is being violated.
3. Description of the incident/rule violation.
4. Provide as much detail as necessary on the incident/rule violation.

Please email the completed form to
director@arkansassoccer.org