OPPORTUNITY TO PARTICIPATE COMPLAINT FORM

Part VII of the USEF Bylaws provides a process by which a complaint may be filed against USEF alleging that the Federation denied or threatened to deny the opportunity of an athlete, coach, trainer, manager, administrator, or official to participate in Protected Competition as defined in the USOPC Bylaws ("Protected Competition") or other competition licensed or sanctioned by the Federation. (see www.usef.org and www.usoc.org) For information on filing a grievance through the USOPC, contact the USOPC Athlete Ombudsman Office at (719) 866-5000, or ombudsman@usathlete.org, or visit www.athleteombudsman.org

This complaint form must be used when filing an Opportunity to Participate Complaint with the Federation. A complaint that is not filed in accordance with Federation Bylaws shall render the filing ineffective and the complaint shall not be considered to have been properly filed. The complaint shall be filed with the Federation Regulation Department at disputes@usef.org. At the time of filing, Claimant must also serve a copy of the complaint on president@usef.org, generalcounseloffice@usef.org, and any affected parties. Any questions should be directed to the Director, Regulation Department at epratt@usef.org

Bylaw 707 prohibits retaliation against anyone who files a complaint or report under the procedure in the Bylaws. Retaliation is considered a violation of the Federation rules and grounds for discipline.

I. THE CLAIMANT

1. Claimant(s). If there is more than one claimant, please list all claimants’ names and complete contact information for primary claimant. Attach additional papers if necessary.

   1.1. Claimant’s Name: 

   1.2. Claimant’s USEF Member #: 

   1.3. Claimant’s full mailing address: 

   1.4. Claimant’s telephone numbers: Home (_____) 

          Work (_____) 

          Cell (_____) 

   1.5. Claimant’s e-mail address: 

   1.6. Name of the authorized spokesperson or representative (i.e. lawyer, trainer, parent): 

   1.7. Contact details for Authorized spokesperson/representative (i.e. lawyer, trainer, parent):

          1.7.1.1. Email address: 

          1.7.1.1.2. Telephone numbers: work (___) /cell (___) 

          1.7.1.1.3. Mailing Address: 

OTP Form.2020
II. PROTECTED COMPETITION/USEF COMPETITION

Please identify the subject competition, including the date, and whether (a) the competition is a “Protected Competition” pursuant to USOPC Bylaws; or (b) whether the competition is a USEF licensed or sanctioned competition falling outside the “Protected Competition” definition. Additionally, identify any relevant deadlines associated with your participation in this competition, e.g. Nominated Entry deadline, Definite Entry Deadline, general entry deadline, etc.


III. STATEMENT OF THE DISPUTE

Please provide on Attachment A the facts (in numbered paragraphs) supporting the alleged denial or threat of denial of claimant’s opportunity to participate. For selection disputes, please also provide, if available, information regarding the selection process and a copy of the relevant selection procedures.


IV. REMEDY

Please specify the remedy you are seeking:


V. IDENTIFICATION OF AN AFFECTED PARTY

Please indicate on Attachment B, to the best of your knowledge, the name and contact information, if known, of any individuals who may be affected by the outcome of this matter, e.g. any person or horse owner whose selection, ranking, or other status could be affected by the decision and the reasons justifying why that person could be affected.


VI. URGENCY

To the best of your knowledge, is there an urgency to resolve the dispute and if so, provide the reasons justifying the need for an expedited procedure and the deadline to resolve the dispute:
VII. **OTHER PROCEEDINGS**

Are you aware of any other complaint filed or other ongoing proceedings that might have an effect on the present complaint? If yes, please provide the forum in which the compliant or proceeding is being heard and if available, the contact information of the parties involved:

______________________________________________________________

______________________________________________________________

______________________________________________________________

VIII. **SIGNATURE**

The complaint must be signed by the claimant.

Signed on ______________________

(Date)

______________________________________________________________

(Signature)

______________________________________________________________

(Printed Name)
ATTACHMENT A

STATEMENT OF THE DISPUTE
ATTACHMENT B

LIST OF AFFECTED PARTIES