**Witness Statement Form**

Individual filing grievance: ________________________________________________________________

Name of individual or committee grievance is filed against: ______________________________________

Date of test: ___________________________ Type of test (circle one):                 Water                       Draft

Test-giving club: _______________________________________________________________________

Names of witness completing this form: _______________________________________________________

Were you an exhibitor at the test in question (circle one)?  Yes                    No
Were you a spectator at the test in question (circle one)?  Yes                    No
Were you a steward at the test in question (circle one)?   Yes                    No
Were you in any other official capacity at the test in question (circle one)? Yes            No

If yes, what was your official capacity? ____________________________________________________

Please write a concise description of the actions you personally witnessed. Do not include information provided to you by others at the test. Please be as specific as possible when stating names of those involved, locations, and times of the witnessed actions. (Use the back of this page if needed.)

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

I affirm that the information on this page is true and that I personally witnessed the actions described.

Signed: _______________________________________________________ Date: __________________________