



## Appeal against a Protest Decision

Please complete the form with capital letters

Athlete's Family Name: \_\_\_\_\_

Athlete's First Name: \_\_\_\_\_

Event in which disqualified: \_\_\_\_\_

NPC: \_\_\_\_\_

Chef De Mission/Team Leader (Printed Name): \_\_\_\_\_

Signature: \_\_\_\_\_

Details of Appeal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Appeal Fee Paid:  yes  no

Date and Time the form was received: \_\_\_\_\_

Signature of TD/ATD receiving the form:

Printed Name:

Signature:

\_\_\_\_\_



Decision on the Appeal: Upheld / Denied

Reason/s: \_\_\_\_\_

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Date and Time of decision given to NPC: \_\_\_\_\_

**Name and signature of officials:**

Printed Names:

Signatures:

\_\_\_\_\_

TD/ATD

\_\_\_\_\_

TO

\_\_\_\_\_

TO

Date and Time of decision announcement: