PROTEST FORM

swimming wa

Please complete using BLOCK LETTERS
To be submitted to the Referee, by the responsible team leader, together with $100.
Form must be submitted within 30 minutes following the conclusion of the respective competition.

Event No. _____ **Event** _____ **Male** _____ **Female** _____

Reason(s):

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Team Manager Name _____ **Athlete Name** _____

Team Manager Signature _____ **Club Name** _____

Date _____ **Time of Delivery** _____

SWA Use Only

Received by SWA Meet Director

Signature _____ Protest Deposit Amount Received _____

DECISION RECORDED OVER PAGE

PROTEST FORM

swimming wa

Referees Consideration: ☐ **Protest Upheld**

☐ **Protest Rejected**

Reason(s):

_____

_____

_____

_____

_____

_____

_____

Referee Signature _____ **Date** _____ **Time** _____

Received by SWA Meet Director

_____

Decision Accepted: ☐ **Yes** ☐ **No**

Team Manager Name

_____

Team Manager Signature

_____

Jury of Appeal Decision _____ **Date** _____ **Time** _____

_____

Jury of Appeal Signature

_____