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Appeal Form

Doc 33

Last Edited: 2025/12/4

https://archery.org.au/

(02) 9772 2995



Name of Tournament:				
Location:			Date:	
The Team Manager/Athlete:				
Team Manager/Athlete Name:				
Date:		Time:		
Team	Individual		Other	(Please Circle One)
This appeal is submitted against:				
Description of Appeal or Protest:				
Signed:	nust be submitted to t rperson of the Jury of ed, and before the ne re reached a decision, is final. Copies of the	the Chairperson of f Appeal for this co ext phase of the co , it will be advised Jury of Appeal rep	f the Tourname ompetition on to ompetition. As so on the Jury of a	ent Judges the same day as the soon as the members Appeal Decision Form. ulated to all involved
To be filled in by the Chairperson of the Tournament Judges Commission				
Received:	(time)	Name:		(print)
Signed:				



