Artistic Swimming New Zealand

Competition Details



Official Competition Appeal Form

This form must be submitted in writing by the Team Manager within **30 minutes** of the official scores being released. Appeals without the required documentation and appeal fee will not be considered.

Title of Competition:				
Event:				
Team Information				
Athlete Name:				
Club:				
Name of Team Manager:				
Signature of Team Manager:				
Team Manager Email:				
Team Manager Phone:				
Date:				
Meet Manager Confirmation				
Meet Manager Name:				
Time of Appeal Submission				
Meet Manager Signature:				
Formal acknowledgement of the appeal submission sent to team manager:	☐ Yes ☐ No			
Payment Confirmation				
Appeal Fee (\$200) Received: \square Yes \square No (Note: This fee will be reimbursed if the appeal is upheld.)				



Grounds for Appeal (Please tick the applicable reason)

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camera flashes)	,	((,,,,
Decision Being App	pealed		
Rationale for Appe	al		
(Please provide detailed relevant to your claim.)	l reasoning for your app	peal, including specific r	ules or incidents
For Official Use On	ly		
Referee's Initial Revie	w:		
☐ Appeal Upheld	☐ Appeal Rejected	d	
Reason(s) for Decision	:		
Referee Name:			
Referee Signature		T	I
Date:		Time:	