



World Para Swimming Appeal Form against a Protest Decision

Please complete the form with capital letters

Athlete's Family Name: _____

Athlete's First Name: _____

Event in which disqualified: _____

NPC: _____

Team Leader (Printed Name): _____

Signature: _____

Details of Appeal: _____

Appeal Fee Paid: yes no

Date and Time the form was received: _____

Name and Signature of TD/ATD receiving the form:

Printed Name: _____ Signature: _____



Decision on the Appeal: **Upheld / Denied**

Date and Time of decision announcement: _____