



## World Para Swimming Technical Protest Form

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 Protest \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Resolution sought: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Protest Fee Paid: ☐ yes ☐ no

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

Name and Signature of Referee receiving the form:

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

