



Classification Protest Form

Protest against classification decision concerning:

Name of Athlete:	
Nation:	
Date of Classification:	
Protested decision:	

Reason for the protest:

--

Please use backside if needed

Number and dates of documents attached to support the protest:		
Name of National Member Organisation of World Abilitysport:		
Name:		Signature:

<i>To be filled in by the Chief Classifier</i>		
Received Fee:		
Receiving Date: <i>(of fee and documents)</i>		
Chief Classifier Name:		Signature :