



ASSA Race Protest Form

Name of Competition:		Date of Competition:	
RGO / Club:			
Name:		Bib Number:	
Postal Address:			
City:		Country:	
Phone Number (mobile)		Phone Number (Landline)	
Class:	Indicate (check):		
	Dryland	Sled Sprint	Nordic Distance
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Protest Against: (Name or Entity)	Bib Number:
Describe the action(s) or incident:	
Witnesses:	
Name:	Bib Number:
Signature:	
Name:	Bib Number:
Signature:	

This form must be handed to the Race Marshall within one hour after the protester has finished.

Date:	Time:
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Signature of Protester:
Signature of Race Marshall: