

**REGIONAL AND STATE APPEAL FORM**

DIRECTIONS TO COACHES: This form must be completed in writing if you feel that a rule has been misapplied or misinterpreted. Judgment decisions may not be appealed. If your complaint concerns a judgment decision, this appeal will be considered VOID. After completing the form, present to the MEET REFEREE for consideration.

DATE \_\_\_\_\_ MEET:            Regional            State

CLASS:            A            2A            3A            4A            5A            6A

NAME OF SCHOOL \_\_\_\_\_

NAMES OF CONTESTANTS \_\_\_\_\_

EVENT IN QUESTION \_\_\_\_\_

RULE IN QUESTION \_\_\_\_\_ PAGE IN RULES BOOK \_\_\_\_\_

In concise form state the nature of your appeal and your basis for it.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CERTIFICATION: I certify that I have read the directions above and understand them. I further certify that the information submitted is true and correct to the best of my knowledge.

Signature \_\_\_\_\_ Position \_\_\_\_\_

**TO BE COMPLETED BY REFEREE**

DISPOSITION OF APPEAL: Briefly explain action taken. If NONE, so indicate and explain why.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signatures of Jury of Appeal

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_