

WSA Race Protest Form

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Name of Competition:	Date	e of Competition:
Place of Competition (City, Province, Country):		
Name:	Bib	Number:
Postal Address:	•	
City, Province	Country:	
Phone Number (mobile):	Phone Number (Landline):	
Class:		
Distance:		
Protest against (Name or Entity):		Bib Number:
Witnesses		
Name:		Bib Number
Signature:		1 DISTRIBUTION
Name:		Bib Number
Signature:		
This form must be handed to the Race Marsha Date:	I within one hour after the Time:	protester has finished.
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Team Leader's Name:	Country:	
Team Leader's Mobile Phone Number:		
Signature of Protester:		
Signature of Race Marshall:		