ASA CROSS COUNTRY TRIALS
3 DECEMBER 2022
Potchefstroom

| PARTICIPATION APPEAL FORM | |
|---|---|
| **SURNAME:** | |
| **FIRST NAME:** | |
| **GENDER:** | |
| **DATE OF BIRTH:** | |
| **APPEAL EVENT:** | |
| **PASSPORT NUMBER:** | |
| **2022 ASA LICENSE NUMBER:** | |
| **ATHLETICS CLUB:** | |
| **ASA PROVINCE:** | |
| **PERFORMANCE AT 2022 NATIONAL CHAMPIONSHIPS:**<br><br>**EVENT:** | |

| APPEAL / MOTIVATION |
|---|
| |

**Important Note:**
**If your appeal relates to injury or illness you must provide a supplemental documentation from a medical practitioner of the diagnosis and any other information relevant to the appeal.**