



**TR FORM A.**

To: Registrar, Racing Appeals Tribunal  
1 Globe Derby Drive  
**GLOBE DERBY PARK SA 5110**

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**NOTE: an appeal must be lodged within 7 days of the Stewards' decision**

**\*\*Applicant is to complete both parts of this Appeal Notice\*\***

**PART 1 - Appeal**

Name of appellant.....

POSTAL address.....Postcode:.....

Phone: ..... Mobile: ..... Fax: .....

Email address:.....

**I HEREBY GIVE NOTICE THAT I APPEAL AGAINST:**

a decision of the Stewards made against me on the ..... day of .....20.....  
regarding an alleged race incident in Race.....at (Venue) .....on(date):.....

**(or)**

a decision arising from a Stewards Inquiry on (date).....

**whereby** I was found guilty and convicted of a charge

of.....

.....under Rule(s).....

and a penalty imposed of:

- a fine of \$ .....**and/or a**
- suspension  disqualification of my licence to  ride  train for a period of  
.....\*meetings.....\*days / .....\*weeks / .....\*months / .....\*years  
commencing at(time).....on (date)..... and expiring at (time)..... on(date).....

At the Stewards' Inquiry I  pleaded guilty  pleaded not guilty  did not enter a plea

I am appealing against the conviction and severity of the penalty, OR

I am appealing against the severity of the penalty only

I do not apply for a stay of proceedings

I apply for a stay of proceedings on the following grounds:

.....  
.....  
.....  
.....

In lodging this Appeal and paying the lodgement fee and bond I agree to submit to the jurisdiction of the Racing Appeal Tribunal, the provisions of its Constitution and all Rules passed by the Controlling Authority and agree to be bound by, accept and comply with all directions, findings, determinations and penalties made or imposed by the Tribunal and to do all things necessary to give effect to same. I acknowledge that this Appeal is brought pursuant to the Rules of Racing applicable to my racing code by which Rules I am also bound.

**Dated** this .....day of .....20 .....**SIGNED:** .....(APPELLANT)**Go**

**PAYMENT OF \$100 NON REFUNDABLE LODGEMENT FEE AND \$400 BOND MUST BE LODGED WITH THIS APPLICATION**

**Part 2: Disbursement of fees/bond**

Please accept cash/cheque/credit/debit card in payment of the fee and bond, or charge the amount of \$500.00 to my:

Bankcard

Mastercard

Visa

Credit Card Expiry Date:

Month

Year

 / 

**I acknowledge that this Notice of Appeal will not be processed until funds are cleared.**

Signature of APPELLANT.....

**OFFICE USE ONLY:**

APPEAL NO.....

Payment received on ..... (date).....(Signature of recipient)

Tribunal decision re fee/bond:

Date of any refund to Applicant:

Amount refunded:

Method:

Paid by.....