N E	Notice of Appeal											
Name (Appellant)		EST 1987			Date				Time		am/pm	
Licence #					Meeting							
Kart #					Name (if applicable)							
Class Name					Organiser							
As the Appellant,	I wish to lodge	an appeal ag	ainst the outcom	ne of a 🔲 S	TEWARDS Hearin	ng 🔲 TR	IBUN	AL Hearing				
Hearing Venue					On Date							
You must attach a	copy of the abo	ve Stewards	Hearing findings	or the Tribun	al Hearing writte	l n outcome						
Grounds for the A		Seve	rity of the Penalt	y on and interpr	etation of the Ru		itions					
Brief summary of N Appeal should be												
I/we wish to prese	ent the followin	g witnesses	in support of this	s Appeal (pro	vide attachments	s if insufficie	ent sp	ace)				
WITNESS (NAME)		ADDRESS							PHONE			
I/we agree to be b	ound by the pro	ovisions of th	ne Karting NSW F	Rules, Regulat	ions and Policies	in force.						
Signed							Dat	e				
0	Race Meeting KNSW Tribuna	Stewards wit Il Registrar w	hin 1 hour of the	handing dow being advised	nd received by th In of the Steward If of the outcome Ifee.	ls Hearing Fi			ing.			
	TO BE CO	MPLETED E	BY RACE MEETI	NG STEWAR	DS OR THE KNS	SW TRIBUN	IAL F	REGISTRAF	₹ .			
Track & Race Permit #					Date received			Time recei	ved		am / pm	
Appeal Fee \$		Receipt #			Is this within tim	ne limit?		☐ YES ☐ NO				
Cash	Cheque #											
Cheque Credit Card	Credit Card #					Expiry			CCV			
Steward/Registrar Name		1				KNSW Offic	cials I	icence #				
Signature												
A copy of this com	npleted form mi	ust be provid	ed to the Appell	ant after acce	eptance by:							
Race Meeting Stewards or					• KNSV	KNSW Tribunal Registrar						

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