



APPEAL SUBMISSION

Event Date.....Event Name.....Date Submitted.....

I....., Driver/Entrant of Car #.....Class.....

Telephone Number.....email address.....

appeal the decision of the Stewards made on

I attach the Appeal Fee \$.....

Name of Chair of Stewards.....

Decision being appealed.....

The specific reasons for the Appeal are:

Signed by Appellant.....

Instruction to Appellant:

This Appeal may be given to the Chair of the Stewards or may be delivered to CASC within the time prescribed by the GCR.

CASC Office use only

Date Received..... Mail....Fax....email.....Other.....