

**SPECIAL OLYMPICS GEORGIA
PROTEST FORM**

**MUST BE SUBMITTED TO THE RULES COMMITTEE MEMBERS NO LATER
THAN 15 MINUTES AFTER THE CONCLUSION OF THE COMPETITION
BEING PROTESTED.**

DATE: _____ TIME FORM SUBMITTED: _____

SPORT: _____ EVENT: _____

AGE GROUP: _____ DIVISION (HEAT): _____

AREA _____ AGENCY _____

EXPLANATION OF PROTEST: _____

SIGNATURE OF HEAD COACH: _____

PROTEST APPROVED: _____ PROTEST DENIED: _____

EXPLANATION OF RULES COMMITTEE: _____

SIGNED: _____ TIME OF DECISION: _____



Special Olympics
Georgia