



# Gosford Netball Association Inc.

President: Belinda Beresford  
Secretary: Leanne Phillips

PO Box 1143 Gosford  
Telephone: 4324 2002  
Mobile: 0424 198 352  
Web: [www.gosfordnetball.com.au](http://www.gosfordnetball.com.au)  
Email: [secretary@gosfordnetball.com.au](mailto:secretary@gosfordnetball.com.au)  
ABN: 32 263 572 025

## Application to Appeal Form

### Appellant Information

Information contained in the Application to Appeal Form must be completed in **BLOCK** letters.  
Please complete **ALL** fields.

<u>Contact Details</u>
Affiliate Name:
Contact Person:
Official Position:
Address:
Postal Address:
Telephone (b/h):
Telephone: (a/h):
Mobile:
Email:

1. The appellant appeals pursuant to (insert section and title of Constitution, Policies, Competition Rules, administrative decision etc under which appeal is brought):

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2. From a (state whether a decision, order, refusal etc is appealed against):

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3. By (insert name of person or committee appealed against):

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4. On (insert date of decision etc appealed against):

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5. Matters appealed against are (set out brief description of matter appealed, including whether the appeal is against the whole decision, or part of a decision, and if a part which part or parts of the decision):

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6. Grounds of the appeal are (set out fully the grounds of appeal in numbered paragraphs – if insufficient space the grounds of appeal should be included as an attachment):

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7. Names of witnesses and representatives (include contact telephone numbers of people who are to provide information on your behalf to the Appeals Committee):

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8. The following documents are attached in support of the appeal (set out documents, including title and dates):

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9. Outcome requested (set out the outcome sought or in which way it is claimed the matter appealed against should be varied):

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Capacity: \_\_\_\_\_

To lodge form, please email [secretary@gosfordnetball.com.au](mailto:secretary@gosfordnetball.com.au)