

Racing Appeals Tribunal

Notice of Appeal



An appellant must complete and lodge this form with the Registrar of the Tribunal, together with a bond of \$350.00, (see payment options at the bottom of this form) within 7 days after being told of the decision being appealed against (unless the tribunal allows the appeal to be lodged later).

In accordance with the *Racing Act 1999*, I hereby appeal to the Racing Appeals Tribunal against the decision specified below and on the grounds specified below:

Name of appellant:

Address:

Phone number: Email:

Appellant to answer the following questions:

1. **Decision** appealed against was given by:

.....
.....

2. **Date of Decision** /..... /..... (**Attach copy of decision**)

3. **Grounds of Appeal** (You must *attach* a statement setting out the grounds for the appeal and indicating whether the appeal is against the decision or against the penalty imposed, or both.)

4. Do you wish to produce **additional evidence** to that which was given at the proceedings before the stewards or other racing authority?

Yes No

If Yes, state the names of any persons whom you wish the Tribunal to summons to appear before it.

Name:

Phone number: Email:

Name:

Phone number: Email:

5. Are you obtaining **legal or other representation**? (Representation other than legal representation requires the approval of the Racing Appeals Tribunal)

Yes No

If Yes, provide details:

Name:

Phone number: Email:

Reason for representation (if not legal):

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

Do you wish to apply for a suspension of the decision pending the hearing of the appeal?

Yes No

If yes, you must *attach* a statement indicating why the decision should be suspended.

Declaration: I, the undersigned, declare that all information given in relation to this appeal is true.

Signature of appellant: Date: / /

Payment: Electronic Funds Transfer (EFT) Only

Please ensure a bond payment of \$350 is made along with this submission via EFT to the following account:

ACT Gambling and Racing Commission

BSB: **032777**

Account: **000401**

Reference: **Appellant – please use your surname as a reference.**

The bond is refundable at the discretion of the tribunal at the end of proceedings

Office use only:

Bond and Notice of Appeal received by: Date: / /

For enquiries phone 02 6207 0359 (option 4) or email gamblingharmprevention@act.gov.au