

NOTICE OF INTENTION TO APPEAL

1. 0	Contact	information	n and status	of appellant.
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Fire	st name:	Last name:
Ad	dress:	City/Town:
Pro	vince:	Postal code:
Phone:		Email:
2.	Name of the respondent and any affected parties	

Respondent Name:

Affected Parties (list):

- 3. Date the appellant was advised of the decision being appealed
- Attach a copy of the decision being appealed or a description of decision if written document is not available.
 Description:

5. Grounds of appeal:

6. All evidence that supports the grounds for appeal. You may attach any additional documents that you will feel will help clarify the basis for your appeal:



7. Requested remedy or remedies:

8. Provide detailed reasons for the appeal:



Payment

There is a \$750.00 fee to file an appeal as per EC's Discipline, Complaints, and Appeal Policy.

□ Cheque
□ Money Order
□ I authorize Equestrian Canada to charge my credit card the amount of \$750.00 CDN

Name on card:

Expiration date:

Card number:

CVC:

Submit this form by sending to complaints@sportdispute.com