



EQUESTRIAN VAULTING USA

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OFFICIAL PROTEST

NAME: _____ COMPETITION: _____

ADDRESS: _____ DATE OF COMPETITION: _____

CITY, STATE, ZIP: _____

PHONE: _____ EMAIL: _____

Above is member of _____ EVUSA Recognized Club

Name of Club or Vaulters(s) involved in the violation: _____

Class in which violation occurred: _____ Date: _____

Name of Judge(s) judging the class: _____

Describe the nature of the rule violation:

Please cite rule which applies most for this protest (and give page number(s) from current EVUSA Rule Book)

DATE: _____ SIGNATURE OF PROTESTING PARTY: _____

SIGNATURE OF CLUB COACH OR MANAGER: _____

DATE PROTEST FILED: _____ PROTEST FILED WITH: _____

DISPOSITION:

DATE: _____ SIGNATURE: _____
(Chief Judge or Chairman of the Ground Jury)

DATE REVIEWED BY TECHNICAL COMMITTEE : _____