**HP & JO OPTIONAL PROTEST FORM**

Competition: Date:

Judging Technical

Athlete #: Name: Club:

Category:

Novice Junior Senior JO 10 JO 9 Other

D Score(FIG) E Score(FIG)

Start Value (JO) Final Score (JO)

Coach’s Rationale:

Signature: Time:

Received by: Time: Money:

Accepted: Denied:

Comments including rationale for decision:

Signature Competition Head Judge Time Money Returned

The Competition Head Judge & Gym Sask WAG Program Coordinator must receive a copy of the completed form before it is returned to the person who signed the protest form.

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**GYM SASK JO COMPULSORY PROTEST FORM**

Check One: Vault Bars Beam Floor

Gymnasts Name: Score:

This inquiry is based upon the following (check one):

1. Major Elements (Comp):
2. Neutral deductions:
3. Score Range:
4. Falls/Unusual Occurrences:

List all elements that receive difficulty and connection value Judges’ use only

|  |  |  |  |
| --- | --- | --- | --- |
| **Element/Bonus Value** | **Description of Element(s)** | **Y** | **N** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Coach’s Name: Club:

Received by: Time: Money collected: Money Returned:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Judge #1 | Judge #2 | Judge #3 | Judge #4 | Average |
| Start Value: |  |  |  |  |  |
| Score: |  |  |  |  |  |
| Adjusted SV: |  |  |  |  |  |
| Adjusted Score: |  |  |  |  |  |

 Score not adjusted

 **Signature of Competition Head Judge**

**Please make a copy of this completed form for the Gym Sask WAG Program Coordinator before returning I to the person who submitted the protest**