



# TEAM DISPUTE FORM

## Disputes After the Conclusion of the Trial

(See Rule 6.4 for procedures.)

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

Time: \_\_\_\_\_

Title of person lodging dispute: \_\_\_\_\_

Team Lodging Dispute: \_\_\_\_\_ (Enter Team Code)

Grounds for Dispute—

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Rule Number(s) Violated—

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Trial Coordinator Initials: \_\_\_\_\_

Date/Time Received: \_\_\_\_\_

DECISION by Dispute Panel Whether to Hold Hearing (*circle one*):

Grant

Deny

Reason(s) for Denying Hearing—

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Notes from Hearing—

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Decision/Action of Dispute Panel—

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\_\_\_\_\_  
Signature of Trial Coordinator

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Date/Time of Decision