

## **REQUEST TO RAISE THE APPARATUS**

(or remove the Supplementary mat for Rings)

National Federation					
Contact Person		Name			
		Mobile Number			
JUNIORS		SENIORS	MAG		WAG
Apparatus		Uneven Bars Rings High Bar			r 🗌
BIB#		Gymnast's name			Height of Gymnast
<u>Submission</u>					
Date Time		Signature of the Head of Delegation Signature of the			L.O.C. Representative
Result of the Request					
Approved [	Refu	sed	Date:	Time:	
Signature of Technical Delegate					
This request must be submitted to the MTC / WTC Chair of the Superior Jury, 24 hours prior to the start of Podium Training.					