**INQUIRY FORM**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| National Federation |  | | | Date | |  | | |
| Apparatus Groups | 5 | | | | 3 & 2 | | | |
| Apparatus Individuals |  |  | | |  | | |  |
| Competition Senior ***(Groups)*** | All-Around | | | | Apparatus Final | | | |
| Competition Junior **(*Individuals)*** | Qualification | | | | Apparatus Final | | | |
| Competition Senior ***(Individuals)*** | Qualification | | All-Around Final | | | | Apparatus Final | |
| Gymnast’s full name |  | | | | | | | |
| The NF **agrees** to pay to European Gymnastics the amount of EUR 300.- for the 1st inquiry / EUR 500 for the 2nd inquiry / EUR 1’000 for the 3rd and further inquiries, if rejected | | | | | | | | |

Inquiry for: **Difficulty Body score (DB) / Difficulty Apparatus score (DA)**

***Please circle the Difficulty sub-group(s) for which you submit this inquiry.***

Expected DB score (COMPULSORY):

or / and

Expected DA score (COMPULSORY):

Motivation of the inquiry:

Coach’s full name: Coach’ signature:

**Time Verbal Inquiry received: Time Written Inquiry received:**

Status – for European Gymnastics use only

|  |  |  |
| --- | --- | --- |
| **Superior Jury Decision** | Accepted | Rejected |
| Original **DB Score**: | **Final DB Score:** |
| Original **DA Score:** | **Final DA Score:** |
| Reason: | |
| SJ Signature: | |