# APPENDIX 6 – APPEAL NOTICE TEMPLATE

AREA LEAGUE APPEAL NOTICE

To be sent to relevant the ALMC pursuant to Regulation [16](#_bookmark38)

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| Appellant (name of Club and or team) |  |
| Areas League and Division (if relevant) |  |
| Name of Person submitting Appeal Notice |  |
| Position with Club |  |
| Email |  |
| Phone Number |  |
| Decision being Appealed |  |
| Date of Notification of Decision |  |
| Short reason for Appeal |  |

The club/team confirms that

1. it wishes to Appeal the decision above and is doing so within 5 days of the Date of Notification of Decision.
2. it will pay the deposit of £100 within 7 days of the Date of Notification of Decision to the Area Bank Account.
3. it agrees to submit the full details of its appeal within 14 days of the Date of Notification of Decision
4. it understands it will forfeit the right to Appeal if it does not comply with 2. or 3.
5. it may withdraw its appeal prior to submission of the full details and the deposit will be returned.

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| --- | --- |
| Signed |  |
| Print Name |  |
| Position with Club |  |
| Date |  |

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