

# WHIPLASH MOTOR SPORTS Protest Form

Time Received:
Received By:
Number:

**Please fill in and check as appropriate**

Event \_\_\_\_\_  
Date \_\_\_\_\_  
Class \_\_\_\_\_

Name of Protesting Party: \_\_\_\_\_  
Name of Protested Party: \_\_\_\_\_  
Time and Place of incident: \_\_\_\_\_  
Rules allegedly broken or unsafe behavior: \_\_\_\_\_  
\_\_\_\_\_

Witness(es): \_\_\_\_\_

Did you inform the protested vehicle of your protest? Yes  No   
Did the protested admit wrong doing? Yes  No

Description of the incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Result of the incident to your race team: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did this incident put you out of the race? Yes  No   
How much time did you loose as a result of this incident? \_\_\_\_\_

Protested's response: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do not mark below this line**

Decision of the protest committee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Penalty: \_\_\_\_\_