



REQUEST TO RAISE THE UNEVEN BARS

Appendix 4

UNEVEN BARS (10 cm only)

NF / NOC		
Contact person	Name	
	Mobile number	

BIB #	Gymnast's name	Height

Requested competition for the apparatus to be raised			
QC	TF	AAF	AF

Submission

Date	Time	Signature of the Head of Delegation	Signature of the O.C. representative

According to the current regulations, this request has to be submitted to the Information desk **at least 24 hours before the official podium training.**

Status of the request			
Approved	<input type="checkbox"/>	Refused	<input type="checkbox"/>
		Date/Time	
Technical Delegate Signature			