

Namibia Motorsport Federation  
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Ausspannplatz

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## PROTEST / APPEAL

PERMIT NO:		DATE:	
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CLUB:			
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NAME OF EVENT:		CAR/BIKE NO:	
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COMPETITOR NAME:		CONTACT NUMBER:	
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ADDRESS:

PROTEST: (Attach additional report if required)

Competitor Signature:	Time:	
	Date:	

Clerk of the Course Signature:	Time:	
	Date:	

NMSF Steward Signature:	Time:	
	Date:	

Fee Attached:	Competitor Signature:
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Clerk of the Course/ Ass Clerk of the Course / Official Remarks: