AFL Victoria Notice of Appeal – 8.1 Region Appeal

This Notice of Appeal form may be used by a Person or Club to lodge an Appeal.

PART A APPLICANT DETAILS

Appeal By	Player	☐	Club	☐	Controlling Body	☐	Other Person ☐

Applicant Name		Role	
Club (if applicable)		League	

PART B DECISION SUBJECT OF APPEAL

Select the relevant decision subject to this Appeal	A) Transfer refusal by Source Club where dispute cannot be resolved [section 8.1 of the AFL Victoria Country Rules] – proceed to **Part D**	☐
	B) Age Dispensation Appeal [section 8.3 of the AFL Victoria Country Rules] – proceed to **Part C**	☐
	C) Any other matter referred by AFL Victoria Community Football Manager – proceed to **Part C**	☐

Decision Date		Decision By	
Provide a description of the Decision that is subject of this Appeal			

PART C APPEAL GROUNDS

(Only relevant to an appeal of **B & C from Part B above**). Age Dispensation Appeal may only select options 1 or 2 below.

Select one or more of the following Appeal Grounds	1) The decision involved an error of law that had a material impact on the Tribunal's decision	☐
	2) The decision was so unreasonable that no Controlling Body or Tribunal acting reasonably could have come to that decision having regard to the evidence before it	☐
	3) The classification of the Reportable Offence or Policy Breach or other conduct (as applicable) was manifestly excessive or inadequate	☐
	4) The sanction imposed was manifestly excessive or inadequate	☐

PART D APPEAL SUBMISSION

Detail your submission in support of this Appeal including specific reference to the appeal grounds, as selected in Part C, under which this is lodged. Additional detail as part of the submission may be attached to this application form.	

Documents Submitted in Support of Application	Document Date	Document Description

PART E PAYMENT & DECLARATION

Payment Made	Yes ☐	Ensure proof of payment is attached to this application and outlined in Part D above	
Your Name		Declaration	In signing this *Notice of Appeal*, I, and any party that I am representing (e.g., a Club), agree to be bound by the decision of the Appeal Board.
Signature			
Date			

Payment or evidence of payment to AFL Victoria Country of the sum of **$750.00** for costs of the appeal, which sum shall be dealt with in accordance with section 26.4 (d) & (e) of the National Community Football Policy Handbook.

For the purpose of transferring any Appeal fee to AFL Victoria, please use the below details:

Name: NAB Australian Football League
BSB: 083-054
Account Number: 16-228-6902
Reference: *'Appeal - Player Surname & Club Name'*

Following the transfer of the appropriate fee, proof must be attached to this application form e.g., a copy of online remittance advice or screen shot of transaction to the below email within the required timeframe.

Charlotte Hammans (Football Operations Manager) – charlotte.hammans@afl.com.au

This appeal form must be submitted by the Appellant lodging with the Controlling Body, by no later than 5:00pm on the day following the relevant decision of the Tribunal or Controlling Body.