



Gymnastics - Rhythmic Inquiry Form



Group

NOC		Date	
Competition	All-Around Qualification <input type="checkbox"/>		
	All-Around Final <input type="checkbox"/>		
Apparatus	5 Balls <input type="checkbox"/>	3 Hoops + 2 pairs of Clubs <input type="checkbox"/>	

Inquiry for: **D1-D2** score / **D3-D4** score

Please circle the Difficulty sub-group(s) for which you submit this inquiry.

Expected **D1-D2** score (COMPULSORY): _____

or / and

Expected **D3-D4** score (COMPULSORY): _____

Coach's full name: _____ Coach's signature: _____

Time Verbal Inquiry received: _____ Time Written Inquiry received: _____

Status – for FIG use only

Superior Jury Decision	Original D1-D2 Score: Final D1-D2 Score:	HIGHER <input type="checkbox"/>
		UNCHANGED <input type="checkbox"/>
		LOWER <input type="checkbox"/>
	Original D3-D4 Score: Final D3-D4 Score:	HIGHER <input type="checkbox"/>
		UNCHANGED <input type="checkbox"/>
		LOWER <input type="checkbox"/>
	Original Final D Score: Final Final D Score:	
	If score unchanged or lower, NOC agrees to pay the relevant amount as per TR 8.4. Invoice to be sent by FIG	
	Reason:	
	SJ Signature:	