

# Application for Anti-Doping Rule Violation Proceedings

## 1. Details of the Applicant

|                |          |            |         |
|----------------|----------|------------|---------|
| Name           | TITLE    | FIRST NAME | SURNAME |
| Postal Address | STREET   |            | SUBURB  |
|                | CITY     |            |         |
|                | POSTCODE |            |         |

Contact Person for this application

|                |       |            |         |
|----------------|-------|------------|---------|
| Name           | TITLE | FIRST NAME | SURNAME |
| Position       |       |            |         |
| Telephone (Wk) |       | Mobile     |         |
| Facsimile (Wk) |       |            |         |
| Email          |       |            |         |

## 2. Details of the Athlete

Please provide the last known contact details of the person against whom you allege may have or has committed an Anti-Doping Rule Violation (“the Athlete”).

|                |          |            |         |
|----------------|----------|------------|---------|
| Name           | TITLE    | FIRST NAME | SURNAME |
| Postal Address | STREET   |            | SUBURB  |
|                | CITY     |            |         |
|                | POSTCODE |            |         |
| Telephone (Wk) |          | (Hm)       |         |
| Facsimile (Wk) |          | Mobile     |         |
| Email          |          |            |         |

## 3. Details of Representative

Please insert the details of your legal representative or other person, if any, who will be representing the Applicant in these Proceedings.

|                        |          |  |        |
|------------------------|----------|--|--------|
| Name of Representative |          |  |        |
| Firm/Company           |          |  |        |
| Postal Address         | STREET   |  | SUBURB |
|                        | CITY     |  |        |
|                        | POSTCODE |  |        |

Contact Person for this application

|                |       |            |         |
|----------------|-------|------------|---------|
| Name           | TITLE | FIRST NAME | SURNAME |
| Position       |       |            |         |
| Telephone (Wk) |       | Mobile     |         |
| Facsimile (Wk) |       |            |         |
| Email          |       |            |         |

#### 4. Jurisdiction

Give details of the basis of the Tribunal's jurisdiction.

#### 5. Alleged Anti-Doping Violation

(a) Give details of the alleged anti-doping violation.

(b) Give details of the article or rule in the WADA Code, Sports Anti-Doping Rules or other relevant constitutional or regulatory provision which the Athlete has allegedly infringed.

(c) Summarise the evidence which will be produced in support of the alleged violation (the summary will not preclude further evidence being brought in accordance with any direction given by the Tribunal). If the basis of the allegation is a positive test result provide a copy of the documents evidencing that result.

## 6. Provisional Suspension

- (a) Has the NSO (if the applicant is not the NSO) had its attention drawn to the provisional suspensions provisions of the Doping Rules?  Yes  No
- (b) Is the Applicant applying for the Athlete to be provisionally suspended?  Yes  No

If answer to (b) above is yes and Applicant is applying for provisional suspension, please also complete and file Form 6 Application for Provisional Suspension in Anti-Doping Rule Violation Matter.

## 7. Result Sought

Please supply the outcome sought in accordance with the applicable doping rules/policies.

## 8. Information about Athlete's Sporting Activities

- (a) Do you know if the athlete plays or otherwise participates in other sports, apart from the sport to which the alleged anti-doping violation applies?  Yes  No

If so please provide details of those sports below:

- (b) If known, please provide details of the athlete's sporting commitments over the next 6 months below:

- (c) Please provide any other information you think may be relevant about the athlete's sporting activities:

## Authority

Name

by signing this application certifies that the signatory is authorised to sign this application on behalf of the Applicant.

Signed

Position

Date

### Filing and Service Instructions

1. This application should be signed and filed with the Registrar of the Sports Tribunal at the address given below.
2. The application should be accompanied by the prescribed filing fee (if any) together with a copy of the applicable constitution, rules or policies which give the Applicant the basis for bringing the allegations.
3. Where possible, a summary of the evidence to be brought in support of the allegations and a copy of documents evidencing a positive test return should be attached.
4. The Applicant is to personally serve a copy of this application and attachments on the Athlete as soon as practical after the original has been filed with the Tribunal and will forthwith after service forward to the Tribunal Notice of Service on the form attached.

The Registrar  
Sports Tribunal  
PO Box 3338  
WELLINGTON

Ph: 0800 55 66 80  
Fax: 0800 55 66 81

Email: [info@sportstribunal.org.nz](mailto:info@sportstribunal.org.nz)  
Web: [www.sportstribunal.org.nz](http://www.sportstribunal.org.nz)

# Notice of Service

(to be attached to Form 1)

I,     
hereby certify that on the  day of  20

I personally served upon the Athlete named in the attached application a true copy of the Application and supporting documents.

Attached hereto is a copy of the Application and supporting documents which I served on the Athlete. I have initialled each page of the Application form and supporting documents as evidence that these are true copies of the documents so served.

Dated the  day of  20

Signed

# Notice to be Endorsed on Application Served on Athlete

|         |                                       |                                     |
|---------|---------------------------------------|-------------------------------------|
| To      | <input type="text"/>                  |                                     |
| Address | <input type="text" value="STREET"/>   | <input type="text" value="SUBURB"/> |
|         | <input type="text" value="CITY"/>     |                                     |
|         | <input type="text" value="POSTCODE"/> |                                     |

This is a copy of the application filed by the Applicant with the Sports Tribunal.

The Tribunal has an obligation to promptly hear this application. Your rights are:

- (a) To defend the application.
- (b) To admit the violation but advise you wish to participate in a hearing to make submissions on any penalty which may be imposed; or
- (c) to admit the violation and advise you do not wish to participate in a hearing and understand that a penalty will be determined by the Tribunal based on the application.

You must by 5.00pm on a date not later than seven working days from the service of this notice on you complete, sign and return the attached Form 2 if you wish either to defend the Application or to admit the violation but to participate in the hearing to consider the penalty. If you do not take such action the Tribunal has the right to hear and determine the application in your absence and impose a penalty on you.

If you need more time to complete and return the attached form, you should immediately apply to the Registrar for an extension of time.

A copy of the relevant Rules of the Tribunal is enclosed for your information. If you have questions regarding this matter, please contact the Registrar on 0800 55 66 80 or email on [info@sportstribunal.org.nz](mailto:info@sportstribunal.org.nz).