**COURT OF ARBITRATION FOR SPORT (CAS)**

**Ad hoc Division – Games of the XXXIII Olympiad in Paris**

**Application**

(to be completed in English)

**1. applicant**

Name: .

Address on site of the OG:

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Phone number on site of the OG:

E-mail on site of the OG: .

Other means by which the Applicant can be reached:

**2. person representing the applicant, if any**

Name:

Address on site of the OG:

Phone number on site of the OG:

E-mail on site of the OG:

**3. respondent**

Name:

Address on site of the OG:

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Phone number on site of the OG:

E-mail on site of the OG:

**4. other parties, if any**

Since, depending on the circumstances, it may be necessary or desirable that the competent IF and/or NOC participate in the hearing, please specify their contact details.

**IF**:

Phone number on site of the OG:

E-mail on site of the OG:

**NOC**:

Phone number on site of the OG:

E-mail on site of the OG:

Are there any persons, organizations not named above who may, in your mind, be adversely affected by any decision which CAS may issue in this matter? In particular, are there any athletes or teams who may be affected? If so, please specify their details:

Name(s):

Contact person :

Phone number on site of the OG:

E-mail on site of the OG:

**5. details of the decision challenged, if any**

Date of decision: .

Decision made by:

Attach a copy of the challenged decision to this application

**6. jurisdiction of cas**

[ ] based on the arbitration clause inserted in the official entry form for the O.G.

[ ] based on another arbitration clause or agreement, namely:

attach copy)

**7. details of the application**

Brief statement of facts and legal arguments:

Relief requested:

***SECTIONS 8 AND 9 ARE OPTIONAL; COMPLETE ONLY IF YOU REQUEST A STAY OR OTHER EXTREMELY URGENT INTERIM RELIEF***

**8. application for a stay of the execution of the decision challenged**

If stay applied for, state reasons for such application:

**9. application for other extremely urgent preliminary relief**

If preliminary relief applied for, state reasons for such application:

**10. attachments to this application**

The decision being challenged [ ]

Document containing arbitration clause [ ]

Power of attorney [ ]

Applicable Rules/regulations [ ]

Other:

**11. additional comments, if any**

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Paris, xx July/August 2024

signature of the Applicant

Alternatively:

signature of Applicant's

counsel or other representative

(attach power of attorney)