**Application**

(to be completed in English and sent to: adhocdivision@tas-cas.org)

**1. applicant**

Name:

Address on site of the Event:

 ............................................................................................

Phone number on site of the Event:

E-mail address on site of the Event: .

Other means by which the Applicant can be reached:

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

Name:

Address on site of the Event:

Phone number on site of the Event:

E-mail address on site of the Event:

**3. respondent**

Name:

Address on site of the Event:

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Phone number on site of the Event:

E-mail address on site of the Event:

**4. other parties, if any**

Since, depending on the circumstances, it may be necessary or desirable that any other potentially affected National Federation (NF) participates in the hearing, please specify the NF’s details.

NF:

E-mail address on site of the Event:

Mobile number:

Address (if applicable):

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):

Address on site of the Event:

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Team Manager:

E-mail address on site of the Event:

 ............................................................................................

Mobile number:

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

Date of decision: .

Decision made by:

Attach a copy of the decision that is being challenged to this application

**6. jurisdiction of cas**

[ ] based on the arbitration clause inserted in the official entry form for the FIBA Women’s World Cup 2022.

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

 (attach a 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 challenged decision [ ]

Document containing arbitration clause [ ]

Power of attorney, if applicable [ ]

Rules/regulations of the International Federation, if applicable [ ]

Other:

**11. additional comments, if any**

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Australia, …………… September 2022

signature of the Applicant

 Alternatively:

 signature of Applicant's

counsel or other representative

 (attach power of attorney)