

FORM 8

Notice From Interested Party

I/we

TITLE	FIRST NAME	SURNAME
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 (name)

of

STREET	SUBURB
CITY	
POSTCODE	

 (address)

Acknowledge that I/we have received the Notice to Interested Party which refers to the: (complete details of application and accompanying documents filed with the Tribunal)

TITLE	FIRST NAME	SURNAME
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 (name of applicant)

I/we advise the Tribunal that: (please tick the appropriate box)

- I/we do wish to participate in the Proceeding.
- I/we do not wish to participate in the Proceeding and I/we acknowledge that the Tribunal may make a decision without further recourse to me/us.

Signed

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Date

DAY / MONTH / YEAR

Instructions for Filing Notice

This form must be completed, signed and returned to the Registrar within seven working days of you receiving the Notice to Interested Party (Form 7).

Contact details are:

The Registrar Sports Tribunal PO Box 3338 WELLINGTON	Ph: 0800 55 66 80 Fax: 0800 55 66 81	Email: info@sportstribunal.org.nz Web: www.sportstribunal.org.nz
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