SR/136/2026

IN THE MATTER OF ANTI-DOPING PROCEEDINGS BROUGHT BY WORLD RUGBY UNDER THE WORLD RUGBY REGULATION 21 (WORLD RUGBY ANTI-DOPING RULES)

Before:

Christopher Quinlan KC (Chair)
Jeremy Summers
Dr Stephen Targett

BETWEEN:

World Rugby **Anti-Doping Organisation**

- and -

Sidney Halupe **Respondent**

DECISION OF THE JUDICAL COMMITTEE

A. INTRODUCTION

1. World Rugby is the world governing body for the sport of rugby union. World Rugby regulates anti-doping matters through Regulation 21 (World Rugby Anti-Doping Rules) ("**Regulation 21**"). World Rugby has responsibility for Results Management of this matter.[1]

2. Sidney Halupe (the **"Respondent")** is an international rugby player for Namibia. As a Player registered with World Rugby and a participant in competitions and other activities organised, convened, authorised, or recognised by World Rugby, the Respondent was at all relevant times subject to and bound to comply with Regulation 21. He is thereby required to be

[1] Regulation 21.7.1.2.

familiar with the requirements of Regulation 21, including being aware of what constitutes an anti-doping rule violation ("**ADRV"**) and what substances and methods are included on the Prohibited List.[2]

3. By letter, dated 17 November 2025, (the **"Notice of Charge"),** the Player was charged by World Rugby with two ADRVs, being the presence of, and Use of a Prohibited Substance contrary to Regulation 21.2.1 and 21.2.2. The Player accepted committing both ADRVs.

4. Pursuant to Regulation 21.8.1.1.1, the Judicial Committee (the "**Committee**") was appointed by Christopher Quinlan KC, in his capacity as World Rugby's Judicial Panel Chair.

5. The hearing of this matter was conducted by remote video conference call on 13 July 2026. In addition to the Committee, the following persons were in attendance:

On behalf of the Player:

Sidney Halupe, the Respondent

Simon Carroll, Partner, B P Collins LLP

Fabiola Dausas, witness

On behalf of World Rugby:

Ross Brown, Partner, Onside Law

Lily Elliott, Senior Associate, Onside Law

Susan Barry, Legal Counsel, World Rugby

[2] Regulation 21.4.2.

Ross Blake, Anti-Doping Education and Results Manager, World Rugby

Secretariat

Raffaella Prouet, Case Manager, Sport Resolutions

6. The Committee was provided with a hearing bundle comprising 436 pages which is referenced herein: *HB/page number.* The Committee was also provided with a bundle of authorities totalling 553 pages.

7. This is the Committee's unanimous decision and is necessarily a summary. It was reached after appropriate consideration of all the evidence, submissions, and other material placed before it. Nothing is to be read into the absence of specific references to any aspect of the evidence, submissions, or other material. It was all considered and given appropriate weight.

B. FACTS AND PROCEDURAL HISTORY

8. On 25 June 2025, the Respondent provided an Out-of-Competition urine sample (the "**Sample"**), collected as part of World Rugby's Out-of-Competition testing programme. He declared his use of a number of products in the Doping Control Form (the "**DCF**").[3]

9. Under the supervision of a Doping Control Officer, the Sample was split into two (2) separate bottles which were given reference numbers A8208592 (the "**A Sample"**) and B8208592 (the "**B Sample"**). Both Samples were transported to the World Anti-Doping Agency ("**WADA**")-accredited laboratory, Laboratoire Suisse d'Analyse du Dopage in Lausanne, Switzerland (the "**Laboratory"**).

[3] HB/371.

10. The A Sample was analysed in accordance with WADA's International Standard for Laboratories. Analysis of the A Sample returned an Adverse Analytical Finding ("**AAF**") for metabolites of GW1516, a peroxisome proliferator receptor delta agonist.[4] GW1516 is listed under section S4.4.1 of the WADA 2025 Prohibited List, as a 'Metabolic Modulator'. It is a non-Specified Substance and is prohibited at all times.

11. The Respondent was informed of the AAF by World Rugby in a letter dated 11 August 2025.[5]

12. On 28 August 2025, the Respondent requested of World Rugby testing of the B Sample, provision of the Laboratory Documentation Pack from the Laboratory, and an extension of time to provide his explanation.[6]

13. On 14 October 2025, the Laboratory confirmed an AAF in the B Sample.[7] The Respondent was notified of this the same day.[8]

14. On 16 October 2025, the Respondent provided World Rugby with a response setting out his case. In summary, he admitted that metabolites of GW1516 were found in the Sample but denied using GW1516 intentionally. He said the AAF was caused by his use of dietary supplements, which he believed contained GW1516.[9]

15. According to World Rugby's records, the Respondent does not have a relevant Therapeutic Use Exemption.

16. By issuing the Notice of Charge, World Rugby charged the Respondent with the following:

    a. An ADRV, pursuant to Regulation 21.2.1, in that metabolites of GW1516, a Prohibited Substance, were present in the A and B Samples; and/or

[4] Ibid/372 – 411.
[5] Ibid/4 – 11.
[6] Ibid/19 – 20.
[7] Ibid/413.
[8] Ibid/12.
[9] Ibid/64 – 65, §28.

b. An ADRV, pursuant to Regulation 21.2.2, in that the Respondent Used GW1516, on or before 25 June 2025.

17. This matter was referred to World Rugby's Judicial Panel Chairman on 26 March 2026. The same day and, pursuant to Regulation 21.8.1.1.1, he appointed the Committee.

18. Case management directions were issued on 9 April 2026, 17 June 2026, and varied on other occasions, at the request of the parties.

19. No issue was taken with either the jurisdiction or the composition of the Committee.

C. HEARING

I. Respondent's case

20. In support of his case, the Respondent filed the following documents:

a. Written submissions, dated 1 June 2026 (the "**Respondent's Written Submissions**")[10];

b. His Second Witness Statement, dated 1 June 2026 (the "**Respondent's Statement**")[11], together with supporting exhibits[12];

c. Witness statement of Prince John ("**PJ**"), dated 25 June 2026[13]; and

d. Witness statement of Fabiola Dausas ("**Ms Dausas**"), dated 26 June 2026[14].

[10] Ibid/74 – 86.
[11] Ibid/112 – 125.
[12] Ibid/128 – 199.
[13] Ibid/126.
[14] Ibid/127.

21. At the hearing, the Committee first heard evidence from the Respondent and then, from Ms Dausas.

22. The Respondent adopted his witness statement as true and accurate. Therein, he set out his background, both personal and rugby related. He was first named in the Namibian national squad following a trial in January 2025. He has never been paid to play rugby nor been tested before 25 June 2025, during a squad training session.

23. The Respondent's case, in a few sentences, is as follows. He "*very strongly believe*[d]"[15] that the AAF was caused by his Use of commercial dietary supplements known as 'Animal Cuts' and 'Animal Stak', and/or from what he "*believed were vitamin shots*".[16] He said he was advised to take both by a nutritionist and trainer, [redacted]. [redacted] the gym at which he was training, specifically to help him prepare to play competitively for the national team. [redacted] told him, and he had no reason to disbelieve her, that she was a qualified doctor, nutritionist, and dietician. He trusted and paid her.

24. In respect of the Animal supplements, the Respondent said he bought and used them on the advice of [redacted], as part of the nutrition sessions [redacted]. He started Using them in late January 2025 and stopped at the end of March 2025. He used up the supplements and did not keep any of the packaging. He took no steps to check the products or their ingredients. He spoke to her after receiving the notification of the AAF and she told him a supplement must have been contaminated with GW1516. He stated he could not afford to have an analysis conducted nor could he afford to buy more samples of the supplements. In any event, it would almost certainly not be from the same batch he Used.

25. Turning to the injections, [redacted] administered these. She told the Respondent they were "*vitamin C immune booster and vitamin D*"[17] and "*clean*".[18] He described having shots

[15] Ibid/116, §23.
[16] Ibid.
[17] Ibid, §43, HB/121.
[18] Ibid.

periodically before and after Sample collection, on 25 June 2025, and the notification of the AAF. In October 2025, another athlete training at the gym died; it transpired that he had been receiving the same injections. The Respondent suffered a liver infection and infected abdominal abscess that same month. He said that two others who trained at the gym, PJ and another whom he named, were hospitalised. The shots, subsequently, disappeared from the gym fridge and [redacted] would not speak to him. The Namibian Ministry of Health told him [redacted] was not a doctor nor resident.

26. The Respondent was questioned by Mr Brown, on behalf of World Rugby, and stated the following: He played five international matches. He believed [redacted] had been working with elite athletes for twenty years and trusted her. He had no idea, at the time, that some substances were banned in sport. He used the supplements for about one month. The labelling was similar but not identical to the example presented in the hearing bundle[19], but he did not read all of the label. He did not know what vitamins he was injected with, other than being told that the vials contained vitamins C and D. He completed the DCF. He denied deliberately doping.

27. The Respondent told the Committee that he had received no anti-doping education. He did not know anyone who had been subjected to testing before the Sample was taken from him in June 2025.

28. Ms Dausas adopted her witness statement as true and accurate. Although she was questioned on behalf of World Rugby, the substance of her account was not challenged. She said she was present on "*more than ten occasions*"[20] when she saw [redacted] administer injections to the Respondent. Ms Dausas said she saw [redacted] injecting other rugby players in [redacted] gym.

[19] HB/417-418.
[20] Ibid/127.

29. PJ's witness statement was admitted as agreed evidence. He attended the same gym and was also injected by [redacted]. He became unwell and had sustained damage to his liver and kidneys.[21]

30. The Respondent accepted committing the ADRVs but argued they were not committed intentionally. He argued that his Fault or Negligence was not significant. Mr Carroll, who appeared *pro bono,* and to whom we are grateful for his careful and thoughtful submissions, advanced both arguments in writing and orally.

31. Mr Carroll submitted that proving intent was subjective, not objective.[22] Further, he submitted there is no express requirement for the Respondent to establish how the Prohibited Substance got into his system, as was required for no Fault, and no Significant Fault, or Negligence arguments.

32. He further submitted that the Respondent took the supplements and received the injections on the advice of, and from, someone who represented themselves to be, and who he believed to be, a medical doctor, nutritionist, and dietician, experienced in managing such matters for elite-level athletes and players. The Respondent was assured they were "*clean*" products. When he took the supplements, the Respondent did not know that he was committing an ADRV.[23] The Respondent was not an athlete operating at the highest level of the sport or one who knew there was a significant risk of committing an ADRV that he manifestly disregarded.[24] Mr Carroll further submitted that the Respondent's burden to show the ADRVs were not intentional had been discharged.

33. Mr Carroll further stated that the Respondent's Fault or Negligence was not significant. He submitted that the Respondent had proved, to the requisite standard, that the source of the GW1516 was from contaminated Animal-brand supplements and/or the vitamin injections.

---

[21] Ibid/126.
[22] Respondents' Written Submissions, §10(3), HB/77.
[23] Ibid, §12, Ibid, page 79.
[24] Ibid, §17-18, Ibid, page 80.

With the benefit of hindsight, the Respondent accepted that he could and should have done more, but he genuinely believed that he acted responsibly, and on the advice of someone suitably qualified.[25]

II. World Rugby's case

34. World Rugby provided the following documents:

a. World Rugby's Written Submissions, dated 1 May 2026 ("**World Rugby's Written Submissions**")[26];

b. World Rugby's written reply, dated 25 June 2026 (the "**Reply**")[27];

c. Report from Dr Vinod Nair, Associate Director, Sports Medicine Research, and Testing Laboratory, dated 23 June 2026[28]; and

d. Miscellaneous materials[29].

35. Dr Nair's written evidence was not challenged. In his report, Dr Nair opined:

a. *"*[I]*f the supplements were contaminated and were used for about a month (which is consistent with the recommendation on the product label), it is possible that the levels found in Mr Halupe's sample could have arisen from contamination of the supplements."*[30]

b. *"If the injections contained GW1516, it is possible that metabolites were detectable in his urine sample as a result of exposure from the injections."*[31]

---

[25] Ibid, §29/ Ibid/ 85.
[26] Ibid/60-73.
[27] Ibid/87-105.
[28] Ibid106-110.
[29] Ibid/200-436.
[30] Ibid/109.
[31] Ibid.

c. *"Based on documented findings, it is more likely for the Animal supplements to be the source of the contamination rather than the injections – however, without testing the products themselves, it is not possible to be certain."*[32]

d. *"There have been several documented cases of oral supplements being contaminated with GW1516. Contamination of injectables is less documented, though this may be a function of insufficient sampling."*[33]

e. "*Animal studies have shown a degree of liver damage with administration of GW1516.*"[34]

f. In relation to the Animal supplements, "[t]*he ingredients listed on either product make no mention of GW1516.* […] *However, some supplements that make these claims have been known to be contaminated with GW1516.*"

g. "*It is therefore not possible to distinguish between inadvertent exposure from a contaminated product and the tail end of a doping regimen.*"[35]

36. World Rugby's Written Submissions identified the relevant regulatory regime, but expressly reserved its position on sanction therein, pending receipt of the Respondent's evidence and submissions. In the Reply, it characterised the Respondent's case as "*largely* […] *assertions and speculation*"[36]. World Rugby summarised its position:

> *"*[…] *absent any compelling supporting evidence, and prior to understanding Mr Halupe's oral evidence, World Rugby does not consider there is any basis to conclude that Mr Halupe's period of Ineligibility should be reduced from the four-year starting point*."[37]

37. It remained World Rugby's case, after the evidence presented during the hearing, that the Respondent had not discharged the burden to prove he did not act intentionally. Further,

---

[32] Ibid/110.
[33] Ibid.
[34] Ibid.
[35] Ibid.
[36] HB88, §5.
[37] Ibid, §6.

World Rugby did not accept that the Respondent had established that he bore No Significant Fault or Negligence, such that he should receive a reduction in his period of Ineligibility.

D. ANTI-DOPING RULE VIOLATIONS

38. Both ADRVs are strict liability offences. Proof of intent, Fault, Negligence or knowing Use by an athlete of the Prohibited Substance is not required. World Rugby also does not have to show how the Prohibited Substance (or any of its Metabolites or Markers) got into the Respondent's system, or that the Prohibited Substance enhanced the Respondent's performance.

39. In light of the facts summarised herein, which are not disputed, the Respondent's admissions, and the available evidence, the Committee is comfortably satisfied that World Rugby has established each ADRV.

E. SANCTION

I. Relevant rules

40. GW1516 is a non-Specified Substance, prohibited at all times, which means that the starting point is a period of Ineligibility of four (4) years.[38] An ADRV involving a non-Specified Substance, such as GW1516, is presumed to be intentional, and merits a starting point of four years period of Ineligibility, because such substances have significant potential to enhance sporting performance. They do not have legitimate therapeutic benefits.

41. However, Regulation 21.10.2.1.1 provides:

[38] Regulation 21.10.2.1.

"The anti-doping rule violation does not involve a Specified Substance or a Specified Method, unless the Player or other Person can establish that the anti-doping rule violation was not intentional."

42. The burden is therefore upon the Respondent to establish, on the balance of probabilities[39], that the ADRVs were not intentional. If he discharges that burden, the starting point for his sanction will reduce to two (2) years.[40]

43. "*Intentional*" is defined in Regulation 21.10.2.3:

"As used in Regulation 21.10.2, the term "intentional" is meant to identify those Players or other Persons who engage in conduct which they know constituted an anti-doping rule violation or knew that there was a significant risk that the conduct might constitute or result in an anti-doping rule violation and manifestly disregard that risk. […]"

44. It encompasses both intention and recklessness[41], namely the disregarding of a known risk.

45. Regulation 21.10.2.3 does not expressly state that the athlete must prove the source of the Prohibited Substance. It is not a *sine qua non* of proof of the absence of intent. However, the World Anti-Doping Code ("**WADC**"), NADP, and the Court of Arbitration for Sport ("**CAS**") jurisprudence is clear that save in the most exceptional of circumstances, an athlete cannot rebut the presumption of intentional Use, unless they first prove exactly when and how the substance entered their system.

46. Comment 58 to Article 10.2.1.1 of the WADC states:

"While it is theoretically possible for an Athlete […] to establish that the anti-doping rule violation was not intentional without showing how the Prohibited Substance entered one's system, it is highly unlikely that in a doping case under Article 2.1 an Athlete will be successful

[39] Regulation 21.3.1.
[40] Regulation 21.10.2.2.
[41] Sometimes referred to as 'indirect intention'.

in proving that the Athlete acted unintentionally without establishing the source of the Prohibited Substance."

47. As the CAS recognised in *RUSADA v Valieva, ISU v Valieva & RUSADA, and WADA v RUSADA & Valieva*:

> *"*[I]*t is readily apparent that the most persuasive and probative evidence that the Athlete can adduce in an effort to discharge the burden is factual evidence as to the origin of the Prohibited Substance. But this is not a rule of law, it is a matter of evidence*".[42]

48. As a matter of logic, it is difficult for an athlete to prove that they did not take a substance intentionally unless they can demonstrate exactly how and when it entered into their system, and those circumstances show that it was inadvertent Use, not knowing or reckless Use, on their part. As the CAS in *WADA v IWF & Caicedo* made clear, establishing the origin of a substance requires clear evidence:

> *"To establish the origin of the prohibited substance, it is not sufficient for an athlete merely to protest his or her innocence and suggest that the substance must have entered his or her body inadvertently from some supplement, medicine or other product. Rather, an athlete must adduce concrete evidence to demonstrate that a particular supplement, medication or other product that the athlete took contained the substance in question."*[43]

49. The CAS panels have ruled that in principle, it may be possible to accept a denial of intentional Use where there is objective evidence that satisfies the panel that the explanation for the presence of the substance in the athlete's system is contamination, even if the precise source of the contaminant cannot be established. They are rare or exceptional cases, requiring the athlete to pass through the so-called "*narrowest of corridors*":

> *"*[…] *the Panel can envisage the theoretical possibility that it might be persuaded by an athlete's simple assertion of his innocence of intent when considering not only his demeanour,*

[42] Authorities Bundle/ 107, §359.
[43] Authorities Bundle/ 158, §2.

but also his character and history […]. *That said, such a situation would inevitably be extremely rare. Even on the persuasive analysis of Rigozzi, Haas* et al*, proof of source would be '*an important, even critical*' first step in any exculpation of intent. Where an athlete cannot prove source it leaves the narrowest of corridors through which such athlete must pass to discharge the burden which lies upon him".*[44]

50. Even in such exceptional cases, the burden is still very high, as stated in *WADA & World Athletics v Knighton*:

*"Finally, regarding the above mentioned "*extremely rare cases*" in which a ADRV may be deemed unintentional even if an athlete has failed to prove the source of a prohibited substance, the Panel considers that in such a case an athlete has to establish lack of intention with other robust evidence, such as the possibility that the prohibited substance came from a specific product, the athlete's credible testimony, evidence by the athlete's doctors that the athlete had no intent to use a prohibited substance, or the implausibility of a scenario that the athlete intentionally used prohibited substances (CAS 2017/A/5248 and CAS 2023/A/10273). Or, as the CAS Panel in CAS 2023/A/9451, 9455 & 9456 has summarized it:*

'An athlete must provide actual evidence to support his protestations of innocence; he or she must provide 'concrete and persuasive evidence establishing such lack of intent on the balance of probabilities'; protestations of innocence, however credible they appear, 'carry no material weight in the analysis of intent' [...]. The same applies to a 'lack of a demonstrable sporting incentive to dope, diligent attempts to discover the origin of the prohibited substance or the athlete's clean record', which have constantly been rejected as justifications for a plea of lack of intent [...]'*".*[45]

[44] *Mauricio Fiol Villanuva v FINA,* CAS 2016/A/4534, Authorities Bundle/229, §37.
[45] *WADA & World Athletics v Knighton*, CAS 2024/A/10800 & 10802, §112.

II. Decision

(a) Intentional

51. The Respondent must disprove the presumption that the ingestion of GW1516 was intentional. He must establish that he did not engage in conduct which he knew constituted an ADRV or knew there was a significant risk that his conduct might constitute or result in an ADRV, and manifestly disregarded that risk.

52. The appropriate starting point is consideration of the source of the GW1516. The Respondent advanced two possibilities. First, the Animal supplements, which he submits must have been contaminated, as GW1516 is not an ingredient in either product. World Rugby did not suggest that the Respondent was not taking such supplements, and the Committee accepts that he was.

53. The Respondent's case is supported by one aspect of Dr Nair's evidence, "[…] *the levels of GW1516 found in* [the Respondent]*'s sample could have arisen from contamination of the supplements*".[46] There have been several documented cases of oral supplements being contaminated with GW1516. Further, products which do not mention GW1516 as an ingredient, such as Animal supplements, have been known to be contaminated with GW1516.

54. However, on proper analysis, that evidence amounts to no more than contamination of the Animal supplements as a possible source of the GW1516. It does not prove that it probably was the source.

55. The Committee has some sympathy for the Respondent's points that he could not test any of the supplements as he used them all and it would be very unlikely to obtain any of the batch he used (if he could identify it). In any event, he said he could not afford such analysis.

[46] HB/109.

He may have been able to locate the same batch, not least because, for the purposes of Good Manufacturing Practice-certification and Food and Drug Administration registration, manufacturers are required to keep samples of batches for at least a year after the expiry date of the batch.[47]

56. Turning to the injections, the unchallenged (by World Rugby) evidence from PJ and Ms Dausas supports the Respondent's evidence that he received such injections from [redacted]. It is known that GW1516 can cause liver damage. Both he and PJ suffered such after-effects. While there is no medical evidence to support that, it was not challenged by World Rugby. But there is no medical or other expert evidence to explain the *cause* of such liver damage.

57. However, there is no evidence as to what the injections contained. The Respondent states he was told they were "*vitamins C and D*". The Respondent continued to receive the injections after being notified of the AAF. He did not retain any for analysis, which was a missed opportunity. There is no evidence that they contained GW1516, as a contaminant, or otherwise.

58. Dr Nair's evidence does not assist the Respondent, in this respect. He goes no further than to state that *if* the injections contained GW1516, it is possible that metabolites were detectable in his urine Sample because of eventual exposure from the injections. At its highest, the injections were a possible source, but no more than that.

59. The reality is that the Respondent's case amounts to a simple assertion that contaminated Animal supplement/s and/or the injections was/were the probable source. He relied entirely on assertion and speculation, while there are other equally possible explanations.

60. As is clear from the DCF, the Respondent was taking or Using other products namely: "*Aminos, Vitamin D, Diclofenac, 75mg, creatine, whey protein, pre-workout, Leaf pain*

[47] HB/91, §25.

killers".[48] There are also the "*muscle-building supplements*" which he told police that he was taking in March 2025.[49] One or more could have been the source of the GW1516.

61. Further, deliberate doping could have been the source. Mr Brown asked the Respondent if that was the case, and he denied it. Dr Nair's evidence on that issue is equivocal, opining that it is not possible to distinguish between inadvertent exposure from a Contaminated Product and the tail end of a doping regime.

62. For all those reasons, the Respondent has not established, on the balance of probabilities, the source of the GW1516.

63. Turning to the "*narrowest of corridors*" route, World Rugby rightly recognises that there are some unusual features in this case. [redacted] held herself out as a medical expert and there was nothing to put the Respondent on notice that she may not be. Further, she is currently being investigated by police.

64. However, in the absence of proof of source, it is rare indeed for an athlete to establish that the ADRVs were not intentional. There is no persuasive basis for concluding this is one of those exceptional cases, as there is little evidence to support the Respondent's assertions. There are other explanations for the ADRVs, none more likely than the others.

65. For those reasons, the Committee is driven to conclude that the Respondent has not discharged the burden to prove the ADRVs were not intentional. That is not the same as finding the ADRVs were intentional nor that he is a cheat. As the CAS has (rightly) observed:

> *"The Panel emphasises that it does not need to be satisfied that the Athlete did cheat. The choice before it was not binary. As Lord Brandon, an English Law Lord, said in* The Popi M I

[48] HB/371.
[49] HB/195.

985 I WLR 984 'a judge (or arbitrator) can always say that "the party on whom the burden of proof lies in relation to any averment made by him has failed to discharge that burden" [p. 955]'."[50]

66. The period of Ineligibility is fixed at four (4) years, and the Committee has no discretion in that regard.

(b) No Significant Fault or negligence

67. Since the Respondent has not rebutted the presumption of intentional Use, consideration of no Significant Fault or Negligence is precluded.

III. Commencement

68. The period of Ineligibility should commence from the date the Provisional Suspension was imposed upon the Respondent, namely 12 August 2025.[51]

[50] *Villanueva v FINA*, CAS 2016/A/4534, page 14, paragraph 47, FAA19.

F. SUMMARY

69. For the reasons set out above, the Committee:

a. Finds that the ADRVs are proved;

b. Imposes a period of Ineligibility of four (4) years upon the Respondent, pursuant to Regulation 21.10.2.1; and

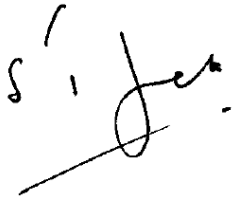
c. Confirms that the period of Ineligibility shall commence on 12 August 2025.



Christopher Quinlan KC
(Chair)



Jeremy Summers



Dr Stephen Targett

On behalf of the Judicial Committee
3 August 2026