

TECHNICAL DISQUALIFICATION SHEET



Event No.	Heat No.	Lane No.	<input type="checkbox"/> Men <input type="checkbox"/> Women	Classification
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Swimmers Name:

Code of Exceptions:

Date:	Time:
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Stroke (Check all that apply)

Freestyle
 Backstroke
 Breaststroke
 Butterfly
 Medley

 Freestyle Relay
 Medley Relay

Infraction occurred

Start of Race
 Start of Stroke (IM)
 During Swim
 At Turn

 Finish of Race
 Finish of Stroke (IM)

Reason for Disqualification: _____

IPC Swimming Rule Number:

Printed Name of Official:	Signature:
Officials Position: <input type="checkbox"/> Turn <input type="checkbox"/> Stroke <input type="checkbox"/> Starter <input type="checkbox"/> Referee <input type="checkbox"/> TA <input type="checkbox"/> Other	

Printed Name of Referee:	Signature:
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Printed Name of TD or TA:	Signature:
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Time Posted/Announced: