DISQUALIFICATION REPORT

EVENT # _____ HEAT _____ LANE _____
SWIMMER _____

STROKE: ☐ FREE ☐ BREAST ☐ IM
                    ☐ BACK ☐ FLY
RELAYS: SWIMMER # _____
☐ STROKE INFRACTION ☐ EARLY TAKE-OFF
☐ CHANGED ORDER
START: ☐ FALSE START ☐ DECLARED FS

REASON FOR DISQUALIFICATION:

JUDGE: _____
REFEREE:_____
RAISED HAND: _____
NOTIFIED: SWIMMER _____ COACH _____

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