



Technical Disqualification Form

Event No.	Heat No.	Lane No.	
Stroke (tick all that apply)			
<input type="checkbox"/> Freestyle	<input type="checkbox"/> Backstroke	<input type="checkbox"/> Breaststroke	<input type="checkbox"/> Butterfly
<input type="checkbox"/> Ind. Medley	<input type="checkbox"/> Freestyle Relay	<input type="checkbox"/> Medley Relay	

Swimmer did not comply with IPC Swimming Rule Number: _____
Additional relevant information: _____

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"/> Other	

Printed Name of Referee:	Signature:
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Time the Disqualification is posted:
