

REQUEST FOR RELAY LEAD-OFF or INITIAL DISTANCE SPLIT TIME

Three extra timers should be furnished by the requesting person. This request should be submitted to the Referee 30 minutes prior to the heat (required for backstroke splits).

(NOTE: backstroke splits require verification of legal finish at initial distance.)

Swimmer's Full Name:			Age:	Date of Birth:
Male / Female	Team:		Requested by:	
Event#	Heat#	Lane#	Full Distance:	Stroke:
Watch #1 : .	Watch #2 : .	Watch #3 : .	Split Distance:	Stroke:
TARGET TIME – DO <u>NOT</u> RECORD IF SLOWER THAN: : .				
Automatic Time : .		Event# for Split:	Official Time : .	Referee init:
Referee initials: (as applicable)	_____ Legal backstroke finish confirmed.			
	_____ Individual event: full distance completed legally.			
	_____ Relay lead-off: order of swim verified.			
Meet:		Location:		Date:

(shaded boxes for official use only)

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