



## DISQUALIFICATION REPORT FOR OVER-AGE SWIMMERS IN HSL GALAS

<b>CLUB:</b>	<b>LANE NUMBER:</b>
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Please hand in to Lead Referee **BEFORE THE START OF THE GALA.**

Should there be an **unexpected** last minute need to swim an over-age swimmer, please inform the referee **before the start of the relevant race**, or failing that, immediately after it and **prior to the start of the next race.**

NUM	EVENT	NAME(S) OF O/A SWIMMER(S)

<b>PRINTED NAME OF CLUB REPRESENTATIVE:</b>
<b>SIGNATURE:</b>

<b>PRINTED NAME OF REFEREE:</b>
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