UNDER AND OVER AGE SWIMMERS DISQUALIFICATION REPORT

Please hand in to the Lead Referee **BEFORE THE START OF THE GALA**

Should there be an **unexpected** last minute need to swim an under or 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.**

CLUB:				LANE NUMBER:
EVENT NO	**AGE GROUP/EVENT**	**LANE**	**RECORD AGE** **UNDER OR OVER**	**SWIMMER NAME**
PRINTED NAME OF CLUB REPRESENTATIVE:				
SIGNATURE:				
PRINTED NAME OF REFEREE:				
SIGNATURE:				

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