

# DISQUALIFICATION REPORT

Event# \_\_\_\_\_ Heat# \_\_\_\_\_ Lane# \_\_\_\_\_  
Swimmer \_\_\_\_\_ Team: \_\_\_\_\_

## BREASTSTROKE

DURING START \_\_\_ SWIM \_\_\_ TURN \_\_\_ FINISH \_\_\_  
10 KICK: ALTERNATING \_\_\_ BUTTERFLY \_\_\_ SCISSORS \_\_\_  
11 ARMS: NON-SIMULTANEOUS \_\_\_  
TWO STROKES UNDER WATER \_\_\_  
NOT IN SAME HORIZONTAL PLANE \_\_\_  
PAST HIPLINE \_\_\_  
12 ELBOWS RECOVERED OVER WATER \_\_\_  
14 CYCLE: HEAD NOT UP \_\_\_ DOUBLE PULLS/KICKS \_\_\_  
15 TOUCH: ONE HAND \_\_\_ NON-SIMULTANEOUS \_\_\_  
16 NOT TOWARD THE BREAST OFF WALL \_\_\_  
19 OTHER: \_\_\_\_\_

## BUTTERFLY

DURING START \_\_\_ SWIM \_\_\_ TURN \_\_\_ FINISH \_\_\_  
20 KICK: ALTERNATING \_\_\_ BREAST \_\_\_ SCISSORS \_\_\_  
21 ARMS: NON-SIMULTANEOUS \_\_\_ UNDERWATER RECOV. \_\_\_  
23 TOUCH: ONE HAND \_\_\_ NON-SIMULTANEOUS \_\_\_  
24 NOT TOWARD BREAST OFF WALL \_\_\_  
25 HEAD DID NOT BREAK SURFACE BY 15M \_\_\_ (Ref/Side Jdg call)  
29 OTHER: \_\_\_\_\_

## BACKSTROKE

DURING START \_\_\_ SWIM \_\_\_ TURN \_\_\_ FINISH \_\_\_  
30 TOES OVER LIP OF GUTTER AFTER START \_\_\_  
31 HEAD DID NOT BREAK SURFACE BY 15M \_\_\_ (Ref/Side Jdg call)  
32 NOT ON BACK OFF WALL \_\_\_  
33 NO TOUCH ON TURN \_\_\_  
34 PAST VERTICAL AT TURN:  
DELAY INITIATING ARM PULL \_\_\_ MULTIPLE STROKES \_\_\_  
DELAY INITIATING TURN \_\_\_  
35 SHOULDERS PAST VERTICAL \_\_\_  
36 COMPLETELY SUBMERGED PRIOR TO TURN OR FINISH \_\_\_  
39 OTHER: \_\_\_\_\_

## FREESTYLE

50 NO TOUCH TURN # \_\_\_\_\_  
51 HEAD DID NOT BREAK SURFACE BY 15M \_\_\_ (Ref/Side Jdg call)

## RELAY

70 STROKE INFRACTION # \_\_\_ SWIMMER # \_\_\_  
71 EARLY TAKE OFF SWIMMER # \_\_\_ (Dual Confirm rqrd, Ref call)  
72 CHANGED ORDER: SWIMMER \_\_\_ STROKE \_\_\_

## OTHER

60 FALSE START \_\_\_ (Ref and Str Confirm req) 61 DELAY OF MEET \_\_\_  
62 DID NOT FINISH \_\_\_ 63 DECLARED FALSE START \_\_\_  
69 OTHER (Describe.) \_\_\_\_\_

## INDIVIDUAL MEDLEY

41 STROKE INFRACTION(S) # \_\_\_\_\_  
42 OUT OF SEQUENCE \_\_\_\_\_

JUDGE: \_\_\_\_\_

REFEREE: \_\_\_\_\_

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