

**Observed Swim Request: WIAA Swimming Championships
Wisconsin Swimming, Inc.**

Instructions: Complete a separate "Request" for **each** observed swim needed and give the "Request" to one of the USA Swimming Officials on deck at the Meet. Relay lead-off names and times will be recorded in the Meet Final Results.

Meet Date _____ Swimmer's Name _____
(Please Print)

Distance & Stroke _____ Swimmer's USA Swimming Club _____

Event Number _____ Requested By _____
(Please Print)

Heat Number _____

Lane Number _____

Stroke/Distance:

_____ was performed in accord with USA Swimming Rules.

_____ was not performed in accord with USA Swimming Rules. Violation _____

Official's Signatures (2 needed for an acceptable swim)

2/02

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