



Form 7
2017 Adaptive Sports USA Junior Nationals™
Swim Relay Form



This form is to be completed by the Head Coach **only** from each team. Refer to the Relay Points matrix and include the **qualifying meet code** and **qualifying time**. Times are verified from all Adaptive Sports USA sanctioned meets, all other results must be attached. Remember that three of the four swimmers must have qualified together. One substitute is allowed.

POINT SYSTEM FOR RELAYS

	S1-4	S 5-6	S 7-8	S 9-10
U11	1	2	3	4
U14	2	3	4	5
U16/U18	3	4	6	8
U20/U23	4	6	8	10

Freestyle Swimming Relay: Team Name _____

Coach: _____

	Indicate Male/Female /Mixed	Meet Code	Time	Yard/M eter	Athlete Names	Class/Age (S1/U14)	Athlete Names	Class/Age (S1/U14)
100 Freestyle 10 point					1. _____		2. _____	
					3. _____		4. _____	
100 Freestyle 20 point					1. _____		2. _____	
					3. _____		4. _____	
100 Freestyle 30 point					1. _____		2. _____	
					3. _____		4. _____	
200 Freestyle 30 point					1. _____		2. _____	
					3. _____		4. _____	
200 Freestyle 40 point					1. _____		2. _____	
					3. _____		4. _____	

Medley Swimming Relay: Team Name: _____

Coach: _____

	Indicate Male/Female/ Mixed	Meet Code	Time	Yard/ Meter	Athlete Names	Class/Age (S1/U14)	Athlete Names	Class/Age (S1/U14)
100 Medley 15 point					1. _____		2. _____	
					3. _____		4. _____	
100 Medley 25 point					1. _____		2. _____	
					3. _____		4. _____	
100 Medley 35 point					1. _____		2. _____	
					3. _____		4. _____	
200 Medley 30 point					1. _____		2. _____	
					3. _____		4. _____	
200 Medley 40 point					1. _____		2. _____	
					3. _____		4. _____	

Alternate Athlete:

Name: _____ **Event:** _____ **Class:** _____