

# SPECIAL OLYMPICS COLORADO AQUATICS RELAY FORM



REGION \_\_\_\_\_  
 PROGRAM \_\_\_\_\_  
 HEAD COACH \_\_\_\_\_  
 EVENT \_\_\_\_\_

RELAY TEAM NAME: \_\_\_\_\_

Do you plan on attending the state competition?	
Yes	No

PARTNER/ATHLETE NAME	Partner/Athlete	DOB	EVENT QUALIFY SCORE		
			(MIN)	(SEC)	(TENTHS)
1.			:	.	
2.					
3.					
4.					

ATHLETE ALTERNATE \_\_\_\_\_ DOB \_\_\_\_\_

PARTNER ALTERNATE \_\_\_\_\_ DOB \_\_\_\_\_

**AQUATICS RELAY EVENTS (Circle or check one event):**

4x25 Meadley (Back, Breast, Butter, Free)	4x25 Unified Meadley (Back, Breast, Butter, Free)
4x25 Free	4x25 Unified Free
4x50 Free	4x50 Unified Free
4x50 Meadley (Back, Breast, Butter, Free)	4x50 Unified Meadley (Back, Breast, Butter, Free)

**NOTE:** List athletes in competition order.

Athletes cannot compete in more than one relay team.

Co-Ed teams compete in male divisions