



OHIO SWIMMING, INC. OHIO TIME CERTIFICATION

INSTRUCTIONS:

A. Relay lead-off times, Individual event initial split times may be officially certified using this form. Pad times are preferred, but 3 watch times are also acceptable.

B. **Coaches:** Please complete the next section and present to the Referee well in advance of the event. We strongly encourage using 3 watches (provided by you) in case of pad failure.

C. **Referee:** Please review the intermediate pad time and/or the 3 watch times. The Official Time is either the Pad Time or the Middle Watch Time if there is a failure of the primary timing system. OTC slips may be certified only by the deck Referee or their designee. Please sign, date, and hand this form back to the Coach. The Coach is responsible for sending in the completed form.

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SWIMMER'S NAME: _____ SEX: _____ AGE: _____

USA ID #: _____ CLUB: _____

NAME OF MEET: _____ LOCATION: _____

DATE OF MEET: ___/___/___ SANCTION #: _____ YARDS: _____ METERS: _____

IND. EVENT ENTERED: _____ DISTANCE: _____ EVENT NO.: _____

EVENT TO BE CERTIFIED: _____ DISTANCE: _____

PAD TIME: _____ : _____ . _____

WATCH TIME #1 _____ : _____ . _____ #2 _____ : _____ . _____ #3: _____ : _____ . _____

OFFICIAL TIME: _____ : _____ . _____

INDICATE TYPE OF CERTIFICATION DESIRED:

STANDARD _____ INITIAL SPLIT _____ RELAY LEADOFF _____

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REFEREE'S SIGNATURE: _____ DATE: _____ / _____ / _____

Coaches – Make a copy of this completed form for your records. Mail, Fax, or E-mail this form to the address below within 3 days. Erin will load the Official Time into the SWIMS database:

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