

## MEET REFEREE / DIRECTOR REPORT

Meet Name: \_\_\_\_\_ Meet Date: \_\_\_\_\_

Referee: \_\_\_\_\_ Director: \_\_\_\_\_

Meet Marshall: \_\_\_\_\_

**Time Line:**

	Session One		Session Two		Session Three	
	Start Time	End Time	Start Time	End Time	Start Time	End Time
Day 1	_____	_____	_____	_____	_____	_____
Day 2	_____	_____	_____	_____	_____	_____
Day 3	_____	_____	_____	_____	_____	_____

*Start and end times are competition time only – Do NOT include warm-up period.*

List extenuating circumstances for exceeding 4-hour meet length:

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List possible solutions to bring about compliance to the 4-hour time length:

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Send to ISI Office along with other meet wrap-up items.