

# UniSport Nationals Relay Form



Event:        Men's 4 x 100m  
                 Men's 4x 400m  
                 Women's 4 x 100m  
                 Women's 4 x 400m  
                 Mixed 4 x 400m

University: \_\_\_\_\_

Running Order	COMPETITOR (In running order)
1	
2	
3	
4	

Team Manager Signature: \_\_\_\_\_

Date:                      Time:                      am / pm

TIC Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**\* This form must be submitted to the TIC Manager 2 hours prior to the event start time.**

**\*\* Substitutions may be notified to TIC Manager UP TO 1hr prior**