APPLY FOR A RECORD - TRACK EVENT

To: The Records Officer, Athletics Australia
APPLICATION IS HEREBY MADE FOR AN AUSTRALIAN RECORD, IN SUPPORT OF WHICH THE FOLLOWING INFORMATION IS SUBMITTED:  (Please type or use block capitals)

1. Event: ______________________________________

2. Class:  
- [ ] Men  
- [ ] All Comers  
- [ ] U/20
- [ ] Women  
- [ ] National  
- [ ] U/18
- [ ] Indoor  
- [ ] U/16

DISABILITY CLASSIFICATION: ______________________________________

3. Record claimed (performance) ______________________________________

4. Full Name of competitor __________________________________________
   Date of Birth ______/_____/______
   __________________________________________
   Date of Birth ______/_____/______
   __________________________________________
   Date of Birth ______/_____/______
   __________________________________________
   Date of Birth ______/_____/______

(For Relay events, the full names and dates of birth of all team members are required in order of running)

5. Competitor's State and Club (or Country if appropriate) __________________________

6. Competitor's Country of Citizenship __________________________________________

7. Date and time ______/_____/______ a.m. / p.m.

8. Where held (Ground, City, Town or State) __________________________

9. I hereby certify:-
   That all the information recorded in this form is accurate.
   That all the appropriate I.A.A.F. and Australian Rules of competition were complied with.
   Name of Referee (BLOCK CAPITALS) __________________________
   Address _____________________________________________________
   Signature of Referee __________________________ Date ______/_____/______

TIMEKEEPER'S CERTIFICATE - HAND TIMING

10. I, the undersigned official timekeeper of the event mentioned on this form do hereby certify that the time set opposite by signature was the exact time by my watch and that the watch used by me has been certified and approved by my State Association

   WATCH NUMBER (BLOCK CAPITALS)
   ______ Time ______ Name __________________________ Signature __________________________
   ______ Time ______ Name __________________________ Signature __________________________
   ______ Time ______ Name __________________________ Signature __________________________

CHIEF TIMEKEEPER

11. I confirm the above Timekeepers exhibited their watches to me and that the times were stated

   Name __________________________ Signature __________________________
   (BLOCK CAPITALS)  (Chief Timekeeper)

ELECTRONIC TIMING
12. A fully automatic timing device was used: Its trade name was ________________________________
   The time recorded was______________________ and this was the official time.

   (A print of the Photo-Finish must be enclosed)
   The above device has been approved by Athletics Australia__________________ Signature________________
   (BLOCK CAPITALS) (Chief Photo Finish Judge)

13. Force and direction of wind_________________

   Operator's Name (BLOCK CAPITALS) ______________________________ Signature________________

14. I hereby certify that the track was measured, with an approved tape, the course over which this event was held
   The exact distance was:-
   ________metres ________cm
   The length of one lap was ________ metres ________ cm
   The maximum allowance for lateral inclination did not exceed 1:100 and in running direction 1:1000.
   The approved tape was tested on _____/_____/_____ and the variation from standard was ______________________

   Name of Technical Manager (BLOCK CAPITALS)_______________________________________________________
   Address________________________________________________________________________________________
   Signature _______________________________ Date _____/_____/_____

15. The names of the first three competitors and their performances were as follows:-

   1st___________________________________________________                     ________________________
   2nd___________________________________________________                     ________________________
   3rd___________________________________________________                     ________________________

16. I have investigated the performances claimed, and recommend that the record be granted/not granted

   Signature of Records Officer_________________________ Date _____/_____/_____

17. Would you like to be presented with an Athletics Australia Record certificate?  Yes/ No

   If YES, Please provide your contact details so the certificate can be mailed to you.
   Name: ____________________________________________
   Address: __________________________________________
   Postcode: _______________________________________

MANDATORY SUPPORTING DOCUMENTS TO ACCOMPANY THIS RECORD APPLICATION:
   A programme of the meeting
   Copy of All Results
   Photo Finish Print
   Wind Readings (if applicable)