Athletics South Australia PO Box 84 TORRENSVILLE PLAZA SA 5031

Athletics South Australia

APPLICATION FOR FIELD EVENT RECORD

To: Events Manager, Athletics SA

APPLICATION IS HEREBY MADE FOR A SOUTH AUSTRALIAN RECORD, IN SUPPORT OF WHICH THE FOLLOWING INFORMATION IS SUBMITTED: (Please type or use block letters).

1.	Event:							
2.	Class		Men Women	_ _ _	Open U20 U18	<u> </u>	U16 U14	
3.	Record Claim	ed (perfo	rmance):					
4.	Full Name of Competitor:				Date of Birtl	n:/_		
5.	Competitors C	Club:						
6.	Date and Time	e:/_		6	am/pm			
7.	Where held (C	Ground, C	City Town or State):					
PLI	EASE NOTE:							
			SA Athletics Stadio eed to be complete					
For	National and/o	r Interna	tional Events pleas g requirements as s	se attach a copy of set by Athletics Austr	the official results. alia.	These wi	l be accepted	d as meeting the
				GUARANTEE BY	KEFEKEE			
8.		the infor		this form is accurate alian rules of compe	<u>-</u>	d with.		
Na	ame of Referee	(BLOCK	LETTERS):					
Ac	ldress:							
Si	gnature of Refe	ree:			Date:/_	/		
			FIE	ELD JUDGES' CE	ERTIFICATE			
9.	We hereby co	ertify that es. We a	the measurement Iso certify that the in	stated opposite or r mplement used and	respective signatur circle or runway co	es is exac mplied wit	t as measure h IAAF Speci	ed in accordance fications.
	Distar	nce or He	eight	Name		Signa	ature	
	Distar	nce or He	eight	Name		Signa	ature	
	Distar	nce or He	eight	Name		Signa	ature	

WIND GAUGE (Long Jump and Trip	le Jump only)							
Force and direction of wind								
Operators Name Signature								
GUARANTEE BY TECHNICAL MANAGER								
11. I hereby certify: The Implement was correctly weighed after the event. Weight me.	asured:							
The Tape used was tested on/ and the variation f	from standard was							
Name of Referee (BLOCK LETTERS):								
Address:								
Signature of Referee: Date:/								
ADDITIONAL INFORMATION DESIRED FOR H	IISTORICAL PURPOSES							
State of Weather Condition of track or runway Type of Track or runway								
RESULT OF COMPETITION	ON							
12. The names of the first three competitors and their performances were at 1st 2nd 3rd								
REPORT – COMPETITION OFFICER								
I have investigated the performances claimed, and recommend that the record be granted/not granted.								
Signature of Events Manager Date/								
	OFFICE USE ONLY Certificate Issued:// Records Database updated:// Signed:							