

APPLICATION FOR TRACK 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 ☐ Open ☐ U16
☐ Women ☐ U20 ☐ U14
☐ U18

3. Record Claimed (performance): _____

4. Full Name of Competitor: _____ Date of Birth: ____/____/____

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

5. Competitors Club: _____

6. Date and Time: ____/____/____ _____ am/pm

7. Where held (Ground, City Town or State): _____

GUARANTEE BY REFEREE

8. I hereby certify:

That all the information recorded in this form is accurate.

That all appropriate IAAF and Australian rules of competition were complied with.

Name of Referee (BLOCK LETTERS): _____

Address: _____

Signature of Referee: _____ Date: ____/____/____

TIMEKEEPER'S CERTIFICATE – HAND TIMING

9. 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 LETTERS)

_____	Time _____	Name _____	Signature _____
_____	Time _____	Name _____	Signature _____
_____	Time _____	Name _____	Signature _____

CHIEF TIMEKEEPER

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

Name _____
(BLOCK LETTERS)

Signature _____
Chief Timekeeper

ELECTRONIC TIMING

11. **For Events conducted at SA Athletics Stadium:**

A fully automatic timing device was used: Its trade name was: _____

The time recorded was _____ and this was the official time.

Signature of Chief Photo Finish Judge _____

The above device has been approved by Athletics Australia.

For Events conducted at a venue other than SA Athletics Stadium:

For National and/or International Events please attach a copy of the official results. These will be accepted as meeting the timing and track measurement requirements as set by Athletics Australia.

WIND GAUGE

12. Force and direction of wind _____

Operators Name _____ Signature _____
(BLOCK LETTERS)

ADDITIONAL INFORMATION DESIRED FOR HISTORICAL PURPOSES

State of Weather _____

Condition of track or runway _____

Type of Track or runway _____

RESULT OF COMPETITION

13. The names of the first three competitors and their performances were as follows.

1st _____

2nd _____

3rd _____

REPORT – COMPETITION OFFICER

14. 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: _____