



Athletics
Tasmania

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records@tasathletics.org.au

APPLICATION FOR A RECORD - COMBINED EVENT

To: The Records Officer, Athletics Tasmania

APPLICATION IS HEREBY MADE FOR AN TASMANIAN RECORD, IN SUPPORT OF WHICH THE FOLLOWING INFORMATION IS SUBMITTED (Please type or use block capitals)

1. Class:

Men	All Comers	U20	U16
Women	Tasmanian	U19	U15
	Indoor	U18	U14
		U17	U13

2. Record claimed (performance) _____
3. Full Name of competitor _____ Date of Birth ____ / ____ / ____
4. Competitor's State and Club (or Country if appropriate) _____
5. Competitor's Country of Citizenship _____
6. Date and time ____ / ____ / ____ a.m. / p.m.
7. Where held (Gound, City, Town or State) _____

PART " A " - TRACK EVENTS

GUARANTEE BY REFEREE

8. I hereby certify:-

That all the information recorded in Part " A " on 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 ____ / ____ / ____

ELECTRONIC TIMING

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

The time recorded for the 100 metres was _____ and this was the official time.

The time recorded for the 100m Hurdles was _____ and this was the official time.

The time recorded for the 200 metres was _____ and this was the official time.

The time recorded for the 400 metres was _____ and this was the official time.

The time recorded for the 110m Hurdles was _____ and this was the official time.

The time recorded for the 800 metres was _____ and this was the official time.

The time recorded for the 1500 metres 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 _____

Chief Photo Finish Judge (Name (BLOCK CAPITALS) & Signature)

WIND GAUGE

10. Force and direction of wind.... for the 100 metres was _____

for the 200 metres was _____

for the 100m Hurdles was _____

for the 110m Hurdles was _____

Operators Name (BLOCK CAPITALS) _____ Signature _____

TIMEKEEPER'S CERTIFICATE - HAND TIMING

11. I, the undersigned official timekeeper of the event mentioned on this form do hereby certify that the times set were the exact time by my watch and that the watch used by me has been certified and approved by my State Association
The times recorded for the 100 metres were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 100m Hurdles were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 200 metres were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 400 metres were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 110m Hurdles were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 800 metres were 1. _____ 2. _____ 3. _____ and this was the official time.
The times recorded for the 1500 metres were 1. _____ 2. _____ 3. _____ and this was the official time.

WATCH

NUMBER (BLOCK CAPITALS)

1. _____ Name _____ Signature _____
2. _____ Name _____ Signature _____
3. _____ Name _____ Signature _____

CHIEF TIMEKEEPER

12. I confirm the above Timekeepers exhibited their watches to me and that the times were stated
Name (BLOCK CAPITALS) _____ Signature _____
(Chief Timekeeper)

TRACK MEASURER'S CERTIFICATE

13. 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 onelap 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 / / _____

PART " B " - FIELD EVENTS

GUARANTEE BY REFEREE

14. I hereby certify:-
That all the information recorded in Part " B " on 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 / / _____

FIELD JUDGES' CERTIFICATE

15. We hereby certify that the measurement stated is exact as measured in accordance with IAAF Rules.
We also certify that the implement used and circle or runway complied with IAAF specifications.
The Distance measured for the Long Jump was _____ and this was the official distance
The Distance measured for the Shot Put was _____ and this was the official distance
The Distance measured for the High Jump was _____ and this was the official height
The Distance measured for the Discus was _____ and this was the official distance
The Distance measured for the Pole Vault was _____ and this was the official height
The Distance measured for the Javelin was _____ and this was the official distance
Combined Event Referee's Name (BLOCK CAPITALS) _____ Signature _____

WIND GAUGE (Long Jump only)

16. Force and direction of wind.... for the Long Jump was _____
Operator's Name (BLOCK CAPITALS) _____ Signature _____

GUARANTEE BY TECHNICAL MANAGER

17. I hereby certify:-

Long Jump The Tape used was tested on ___ / ___ / ___ and the variation from standard was _____
Shot Put The Implement was correctly weighed after the event: Weight measured _____
Shot Put The Tape used was tested on ___ / ___ / ___ and the variation from standard was _____
High Jump The Measuring apparatus used was tested on ___ / ___ / ___
Discus The Implement was correctly weighed after the event: Weight measured _____
Discus The Tape used was tested on ___ / ___ / ___ and the variation from standard was _____
Pole Vault The Measuring apparatus used was tested on ___ / ___ / ___
Javelin The Implement was correctly weighed after the event: Weight measured _____
Javelin The Tape used was tested on ___ / ___ / ___ and the variation from standard was _____
Name of Technical Manager (BLOCK CAPITALS) _____
Address _____
Signature _____ Date / / _____

SURVEYORS' OR MEASURERS' CERTIFICATE FOR FIELD EVENTS

18. I hereby certify that the lateral inclination of the runway did not exceed 1:100 and in the running direction 1:100.

We also certify that the ground where the implement landed was not lower than the runway or circle or that the level of the Long Jump or Triple Jump landing area was not lower than the take off board.

(Name BLOCK CAPITALS) _____

(Qualification) _____

(Signature) _____

PART " C " - RESULT OF COMPETITION

PERFORMANCE OF APPLICANT

20.	<u>Event</u>	<u>Performance</u>	<u>Points</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____
5)	_____	_____	_____
6)	_____	_____	_____
7)	_____	_____	_____
8)	_____	_____	_____
9)	_____	_____	_____
10)	_____	_____	_____

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

1st _____
2nd _____
3rd _____

ADDITIONAL INFORMATION DESIRED FOR HISTORICAL PURPOSES:

State of Weather _____ Condition of track or runway _____
Type of track or runway _____

REPORT - RECORDS OFFICER

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

Signature of Records Officer _____ Date / / _____

MANDATORY SUPPORTING DOCUMENTS TO ACCOMPANY THIS RECORD APPLICATION:

- A programme of the meeting
- A Photo Finish print for Electronically-timed events
- The Timekeepers recording sheet, showing 3 official times (if Hand timed)
- A Copy of the Scorer's Master Sheet
- Copy of All Results
- Wind Readings