Application for Swedish National Record

General Information			Meeting
Event:			Date:
☐ Outdoo	ors 🗆 Indoors		Site:
☐ Men	☐ Women		Venue:
☐ Senior	□ U23 □	U20	Name of Meet:
Performance *			Organizer
Wind:			Supplementary Information
Competitor / Athlete(s)			Times recorded by manual timekeepers
Name:			1: 2: 3:
Date of Birth:			Weight of implement after event: g
Club:			Length of hammer implement: cm
Relay team			Field event performance measured:
Name Date of Birth			☐ by certified steel tape
1:			☐ by EDM (electronically)
2:			Shoe worn by athlete, Company/Model:
3:			
4:			
Combined Events			Road race, course length:
Event	Performance *	Wind	☐ measured according to WA Rules ☐ certified by National Federation
			Doping control
			The competitor(s) supplied urine sample(s) according to Athletics Integrity Unit's anti-doping regulations
			☐ at the competition☐ the day after competition
			The sample has been forwarded for analysis at the
			accredited laboratory in
We hereby certify that all information supplied in this application is correct and that the competition at the Meet also in all other aspects (facility, equipment, implements, race course etc.) was in full accordance with WA rules.			
Competition Director			Referee for the Event
Signature			Signature
* To be enclosed: ☐ Copies of original scorecard for the event (in combined events for all events) ☐ Print of finish photo + zero test photo for running events (in combined events for all running events)			