



Application for an American Record FIELD EVENT

This form must be completed and dispatched within 30 days of the record performance to:

USA TRACK & FIELD

130 East Washington St., Suite 800, Indianapolis, IN 46204
ed.gorman@usatf.org

APPLICATION IS HEREBY MADE FOR THE RATIFICATION OF THE FOLLOWING RECORD, IN SUPPORT OF WHICH THE BELOW INFORMATION IS SUBMITTED: *(Please type or use block capitals, check where appropriate.)*

American Record American U20 Record

American Indoor Record American U20 Indoor Record

APPLICATION DATA

Event (e.g. High Jump, Shot Put):		<input type="checkbox"/> Men	<input type="checkbox"/> Women
Record Height/Distance Claimed (e.g. 2.09, 22.63):			
Full Name of Athlete:			
Athlete Affiliation:		Date of Birth for U20:	
		D	M
			Y
Athlete's shoe brand and model			
Name of Competition:			
USATF Sanction #:			
Date of Event:		Time of Event:	
City:			
Country:			
Name of Stadium:			

RESULTS OF COMPETITION

	Name	Country	Result
1st:			
2nd:			
3rd:			

IMPLEMENTS CONTROL JUDGE (if applicable)

I hereby certify that the implement used in the record claimed has been examined by me after the performance and conforms exactly with the relevant USATF Rule. I further certify that the following implement used is freely available worldwide.

Manufacturer:			
Model:		Measured Weight:	
Certification No.:			
Implements Control Judge:			
Signature:			

SCIENTIFIC MEASUREMENT DEVICE (if applicable)

Type and Make of Device:			
Measurement Judge:			
Signature:			

FIELD JUDGES

We hereby certify that the measurement stated opposite our respective signatures is exact as measured in accordance with World Athletics Rules.

Distance or height:		Name:		Signature:	
Distance or height:		Name:		Signature:	
Distance or height:		Name:		Signature:	

WIND MEASUREMENT (if applicable)

Type and Make of Wind Gauge:			
Wind Speed in the Direction of Jumping:			
Wind Gauge Operator:			
Signature:			

DOPING CONTROL

I, a member of the Doping Committee for the Competition, certify that a sample for a doping test was obtained in accordance with USATF Rules from the above-mentioned athlete in my presence and dispatched to the following accredited laboratory:

Date and Time of Doping Sample Collection:			
Testing Laboratory:			
Doping Control Officer:			
Signature:			

ATHLETICS FACILITY

The Facility holds a current valid World Athletics Facility Certificate:		<input type="checkbox"/> Class 1	<input type="checkbox"/> Class 2	<input type="checkbox"/> Indoor
Or				
The competition site complied with the conditions set out in the World Athletics Certification System. The respective parts of the Measurement Report Form are attached to this application.				<input type="checkbox"/>
Technical Manager:				
Signature:				

GUARANTEE BY REFEREE

I hereby certify that all the information recorded on this form is accurate, that the officials conducting the Competition were duly qualified and that the appropriate USATF Competition Rules were complied with.

Referee:	
Signature:	

THE FOLLOWING MUST BE ENCLOSED WITH THIS APPLICATION

The printed programme of the Competition, the complete results of the event, copy of the Judges' Score Sheet, Official Results, Doping Control Form, Passport copy for U20.

Additional Information for Historical Purposes

Weather Conditions:			
If Available:	<input type="checkbox"/> Video of the record for USATF use	<input type="checkbox"/> Photograph of the athlete	<input type="checkbox"/> Press cuttings

RECOMMENDATION BY USATF COMMITTEE

The undersigned Sport Committee Chair hereby certifies that it is satisfied with the accuracy of this application and recommends it for acceptance:

Committee:	
Committee Chair: (Name)	
Signature:	

USA TRACK & FIELD APPROVAL

USATF Technical Representative	Date	CEO