

Application for Swedish National Record

General Information

Event: _____

Outdoors Indoors

Men Women

Senior Junior (U20)

Performance * _____

Wind: _____

Meeting

Date: _____

Site: _____

Venue: _____

Name of Meet: _____

Organizer _____

Competitor / Athlete(s)

Name: _____

Date of Birth: _____

Club: _____

Relay team

Name	Date of Birth
1: _____	_____
2: _____	_____
3: _____	_____
4: _____	_____

Combined Events

Event	Performance *	Wind

Supplementary Information

Times recorded by manual timekeepers

1: _____ 2: _____ 3: _____

Weight of implement after event: _____ g

Length of hammer implement: _____ cm

Field event performance measured:

by certified steel tape

by EDM (electronically)

Shoe worn by athlete, Company/Model: _____

Sole thickness measured: _____ mm

Road race, course length:

measured according to WA Rules

certified by National Federation

Doping control

The competitor(s) supplied urine sample 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 given above is correct and that the competition at the Meet also in all other aspects (arena, equipment, implements, race course etc.) was in full accordance with WA rules.

<p>Competition Director</p> <p>_____</p> <p>Signature</p>	<p>Referee for the Event</p> <p>_____</p> <p>Signature</p>
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* 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)

Athlete Shoe Declaration Form

**Send application + supporting documents to:
Svensk Friidrott, att. Rekord, Heliosgatan 3, 120 30 STOCKHOLM, Sweden**