



Application for an American Record RACE WALKING 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. 20,000m, 50km):		<input type="checkbox"/> Men	<input type="checkbox"/> Women
		<input type="checkbox"/> Track	<input type="checkbox"/> Road
Record Time Claimed:			
Full Name of Athlete:			
Country of Athlete:		Date of Birth for U20:	
		D	M
		Y	
Name of Competition:			
Date of Event:		Time of Event:	
City / Course:			
Country:			

RESULTS OF COMPETITION

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

STARTER

I certify that the start of the race was in accordance with USATF Rules.

Starter:

Signature:

FULLY AUTOMATIC TIMING (if applicable)

Make of Timing Device:

Official Time Recorded:

Chief Photo Finish Judge:

Signature:

TRANSPONDER TIMING (if applicable)	
Type and Make of Transponder:	
Official Time Recorded:	
Chief Transponder Timing Judge:	
Signature:	

HAND TIMING (if applicable)			
I, the undersigned official timekeeper of the event mentioned on this form, do hereby certify that the time set opposite my signature was the exact time recorded by my watch and that the watch used by me has been certified and approved by USA Track & Field.			
Time:		Name:	
Signature:			
Time:		Name:	
Signature:			
Time:		Name:	
Signature:			
I confirm that the above Timekeepers exhibited their watches to me and that the times were as stated.			
Chief Timekeeper or Referee:			
Signature:			

RACE WALKING JUDGES			
I, a member of the World Athletics Panel of International Race Walking Judges or Area Level Judges, did officiate during the competition.			
Name:		Country:	
Signature:			
Name:		Country:	
Signature:			
Name:		Country:	
Signature:			
Chief Race Walking Judge:		Country:	
Signature:			

COURSE (Road)	
I, an "A" or "B" grade WA/AIMS approved course measurer, hereby certify that I have measured the course over which this event was held.	
Measured Length of the Circuit:	
Measurer:	Qualification:
Signature:	

VALIDATION (Road)	
I, an "A" or "B" grade WA/AIMS approved course measurer in possession of the complete measurement data and maps, certify that the course measured was the course walked by the athlete.	
Measurer:	Qualification:
Signature:	

ATHLETICS FACILITY (Track)

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:				

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:	

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 including the Photo Finish and Zero Test image in the case of a record where Fully Automatic Timekeeping was in operation, Judges' Score Sheet, Official Results, Measurement and Re-measurement Report, Doping Control Form, Passport copy for U20.			
<i>Additional Information for Historical Purposes</i>			
Weather Conditions:			
Intermediate Times:			
If available:	<input type="checkbox"/> Video of the Record	<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