

AUSTRALIAN RECORD APPLICATION - FIELD EVENT

This form must be competed and uploaded to the Athletics Australia Online Record Portal within 28 days of the performance. Please ensure all sections are filled out correctly.

Record Portal https://www.athletics.com.au/surveys/1871/

Event (e.g., Higl	h Jump)						
Men	Men Women (circle)							
Allcomers National (circle)								
(Able Bodied) Open U20 U18 U16								
(Para)	Para) Open U20 U17 U15 Sport Class							
Record Distance/Height Claimed								
Full Name of Athlete Date of Birth/							<i>JJ</i>	
Athlete State and Club (or country if appropriate)								
Athlete Country of Citizenship								
Name of Competition								
Date of Competition/ Time of Event								
Name of Stadium/Venue								
					Result of Co	ompetition		
	Nam	e				State	Result	
1 st								
2 nd								
3 rd								
_								
_				Wind	l Measureme	ent (if applicable		
3 rd	and Mak	e of Wir	nd Gaug		l Measureme	ent (if applicable	2)	
3 rd	and Mak Speed in			ge		ent (if applicable	2)	
3 rd Type Wind		the Dir		ge		ent (if applicable		



		Tech	nical Man	nager		
I hereby certify that t	he imnlen				as heen ex	amined by me after the
performance and cor	•					•
•		chy with the i	elevalit vi	VOITU Para I	Aumenics / v	World Atmetics and
Athletics Australia Ru	iies.					
Manufacturer						
Model				Measured	Weight	
Name of Technical M	anager					
Signature						
Signature						
Data						
Date						

*Please note – the Ted		_	-	uli measur	ement rep	ort for the implement
used for the record to	<u>competiti</u>	<u>ons@athletic</u>	cs.org.au			
			1 /1 10			
			roval (U20			
The shoes worn must	t be on the	e World Athle	tics Shoe (Compliance	e List and i	f not checked by the
Referee						
Brand of Shoe						
Model of the Shoe						
	<u> </u>					
		F	ield Judge	es		
We hereby certify tha	at the mea				natures is	exact as measured in
accordance with the				311C 0 G1 31B		chaot as measarea m
	vvoria i ai	Name	103.		Signature	
Distance or Height		Name			Signature	
51.		-				
Distance or Height		Name			Signature	
Distance or Height		Name			Signature	
				•		•
	Scie	ntific Measur	ement De	vice (if app	licable)	
Measurement Judge						
Signature						
Signature						



Throwing Frame Measurement and Inspection I certify that the Throwing Frame was measured and inspected in the Call Room or at the competition area prior to the commencement of the event, and that the above-mentioned Throwing Frame complies with requirements of World Para Athletics. Measurement Judge 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 appropriate World Para Athletics/World						
Athletics and Athletics Australia rules were complied with.						
Referee						
Signature						
Date						

The following must be enclosed with this Application.

- 1. Printed Programme
- 2. Copy of the Results

If you would like a record certificate, please email competitions@athletics.org.au