

BC, CANADIAN, & WORLD RECORD APPLICATION FORM

BC Record Canadian Record World Record

Distance: _____ Stroke: _____ Pool Length: 25 metres _____ 50 metres _____

Official Time: ____:____.____ Event # _____ Date of Swim _____ yy/mm/dd Sanction # _____

Electronic: ____:____.____ Manual: 1) ____:____.____ 2) ____:____.____ 3) ____:____.____

Time cards and/or Electronic Tape must be attached.

Swimmer's Name: _____ Male _____ Female _____

Swimmer's Address: _____ Province _____ Postal Code _____

Birthdate (yy/mm/dd) ____/____/____ Age (as of Dec 31) _____

Name of Club: _____ Club Code _____

Location of Meet: _____ Name of Pool _____

RELAY EVENT:

Team Name: _____ Club Code _____

AGE GROUP: _____

- Name: _____ Male _____ Female _____ Birthdate: ____/____/____ (yy/mm/dd)
- Name: _____ Male _____ Female _____ Birthdate: ____/____/____ (yy/mm/dd)
- Name: _____ Male _____ Female _____ Birthdate: ____/____/____ (yy/mm/dd)
- Name: _____ Male _____ Female _____ Birthdate: ____/____/____ (yy/mm/dd)

Certifying Official: Name Date Signature

Referee OR Chief Timer: _____

Provincial Recorder: _____

National Recorder: Christian Berger
1130 rue Emma
Longueuil, Quebec
J4J 3A3

FINA Bureau Date Signature

Ratification: Yes _____ no _____

Reason for non-ratification:

WORLD RECORD ONLY:

- Copy of Birth Certificate or Passport Attached _____ or on file _____
- Pool Length Certification Attached _____ or on file _____