

New Zealand Record

Application for recognition of a New Zealand Record – Short Course/Long Course, or Relay

Visito		r		Representative Relay		Age Group		Open	
					Age as a	t day of swim			
TIME:	Min		Sec	100th		RECORD NU	IMBER:		
COMPETITON:		Attach	n Electronic Time N	/erification			DATE:	/ /	
POOL N	AME:					LENGTH:	25m	50m	
DISTA	NCE:	50m	100m	ı 20)0m -	400m 8	300m	1500m	
STYLE:		Frees	style Bac	kstroke	Breaststrok	e Butter	fly	IM	
		New Zea Electroni	aland Records will c Timing in the ev 100 th (one hur	ent of an Elec	tronic Timing sy	are recorded by E stem malfunction eyed, still water sv	and shall	be recognised to	
SWIMMEI NAME[S] IN									
GEN	DER:	M F	DATE OF BI	RTH: /	/	CLUB:			
PAF CLASSIFI (if appli	CATIO					REGION:			
CERTIFIC OF REFER		I, rules of S is concer	SNZ pertaining to N ned.	ereby certify t New Zealand F	hat I was the re Records were ful	feree at the above ly observed so far	e competi as the al	tion and that all pove application	
CONDITI	ONS	•	All New Zealand re	ecord applicati	ons will adhere	to the FINA Rule S	5W12.6 &	SNZ Policy 003	
FOR A RECORD:		 Nothing shall debar a competitor from personally applying for the recognition of their record performance. Where records are established outside New Zealand, applications for recognition must be made within one calendar month of the event and must include one of the following; a copy of the official meet results or a printout of the result from the official website. All officials for the purpose of claims for records shall be qualified by Regional Association examinations. 							
EXISTING RECORD:					EXIS	STING RECORD NUMBER:			
DATE RECEIVED BY SNZ					DATE CERTIF	ICATE ISSUED:			
CHANG .									
Ser.	18		California -		201		5.05	Sor Por	

Swimming New Zealand, 14 Antares Place, Mairangi Bay, Auckland 0632 PO Box 302145, North Harbour, Auckland 0751 P: +64-9-478 2916 www.swimmingnz.org.nz