



Ballarat Little Athletics Centre Records Claim Form v2.0 Sept 2023

FIELD EVENT RECORDS

In the case of a THROW or JUMP the record **MUST** be still spiked and the implement and THROW/JUMP distance checked with a steel tape by the Chief of Officials (if absent, a suitably qualified official or Committee Member) at the time of the attempt. If an athlete is attempting a High Jump record, the official must be called prior to the attempt.

If a record attempt is identified at the commencement of the competition, alert the Chief Official so that they can be present at the attempt and throughout that round of competition.

TRACK EVENT RECORDS

Finish line officials will identify attempts and notify the Chief Official.

RECORD CLAIM

Date of Event:	____ / ____ / ____
Event Record is being claimed for: (eg: Discus)	
Age Group: (eg: Under 12 Boys)	
Athlete Name:	
Distance/Time being claimed:	

CONFIRMATION BY CHIEF OFFICIAL - (If absent suitably qualified official or Committee Member)

Weights for throwing event is correct for age group?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Spike still in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Implement verified?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Steel tape used to confirm measurement?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Hurdle heights and placing are correct for age group and distance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Correct footwear has been worn?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Competition rules have been adhered to?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

CERTIFICATION BY OFFICIALS

I hereby certify that all the information recorded in this form is accurate.

TRACK EVENT STARTER Verified by:	Signature:
TRACK EVENT TIMEKEEPER Verified by:	Signature:
CERTIFICATION BY CHIEF OFFICIAL (If absent suitably qualified official or Committee Member) Verified by:	Signature:
COMMITTEE MEMBER Verified by:	Signature:
Date:	____ / ____ / ____

VERIFICATION BY COMPETITION SUB COMMITTEE

Verified by:	Name:
	Signature:
	Date: ____ / ____ / ____

APPROVED BY BLAC COMMITTEE

Verified by:	Name:
	Signature:
	Date: ____ / ____ / ____

RECORD VERIFIED IN ResultsHQ (RESULTS COORDINATOR)

Verified by:	Name:
	Signature:
	Date: ____ / ____ / ____