

RECORD APPLICATION FORM

NORTHLAND MASTERS ATHLETICS



Event: _____

Status of Meeting: _____

Age Group: _____ Performance: _____ M or F (circle)

Implement weight or anemometer reading (where applicable): _____

Competition Venue: _____ Date of Competition: ____/____/____

I hereby certify that to the best of my knowledge the information I have submitted is true and correct.

Athlete's Full Name: _____

Signed: _____ NMA registration number: _____

Home Address: _____

Email Address: _____ Date of Birth: ____/____/____

Field/Track/Road Referee:

I hereby certify that all technical aspects relating to the above performance were in accordance with NZMA rules.

Name: _____

Signed: _____ Grade: _____

Photocopies of appropriately signed results forms will suffice for compliance with technical aspects and anemometer readings. Nevertheless, the remainder of the above application form must be completed fully. Athletes who are likely to produce record performances should carry with them copies of the form, so that they are available for immediate use.

On completion, this form should be handed to any NMA committee member for ratification by the committee at its next meeting.

www.northlandmastersathletics.org.nz