



## CANADIAN RECORD APPLICATION – RELAY EVENT

Senior Record    Age Group Record    Para-swimming Record    Masters Record

Athlete's Name

Date of Birth (mm/dd/yyyy)

Swimming Canada ID

Leadoff: \_\_\_\_\_

#2: \_\_\_\_\_

#3: \_\_\_\_\_

#4: \_\_\_\_\_

Club: \_\_\_\_\_  Male    Female    Mixed

Event: \_\_\_\_\_ Official Time (mm:ss.00): \_\_\_\_\_

Date of Record Swim (mm/dd/yyyy): \_\_\_\_\_ Age Group (if applicable): \_\_\_\_\_

Competition Name: \_\_\_\_\_  LC    SC

Date of Competition (mm/dd/yyyy): \_\_\_\_\_ - \_\_\_\_\_ Host Club: \_\_\_\_\_

Event Venue: \_\_\_\_\_ City, Province: \_\_\_\_\_

Meet Manager

Referee

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

The above mentioned officials hereby validate the record breaking performance of the applicant. The meet was duly sanctioned and advertised, and we certify that all Rules of Swimming Canada, relating to the establishing of a record, were observed.

Please submit the following paperwork with form:

Official event results including splits and back up times

Submitted By: \_\_\_\_\_ Email: \_\_\_\_\_

The record application form and required paperwork must be submitted to Swimming Canada by email at [natloffice@swimming.ca](mailto:natloffice@swimming.ca) within 7 days of performance.