## Application for Recognition of a Record



**Eligibility:** NZ Citizen by birth or naturalisation, or for the last six months been resident in New Zealand and a financial member of SNZ. Auckland financial member.

Name of Pool:					Length		
Name:				Signature			
Club:							
Date of Birth				Reg. Number			
GRADE(Delete One)	ete One) RECORD DETAILS						
Open	Distance: Date		Male / Female		/ Female		
	Freestyle / Backstroke / Breaststroke / Butte			tterfly / Medley	LC	C/SC	
Yrs	New Time:	Mins Sec		s Manual	Manual / Electronic		
Certificate of Referee							
I hereby certify that I was the Referee at the meeting at that all Rules of SNZ pertaining to New Zealand and Auckland records were fully observed so far as the above application is concerned.							
Signed: Referee							
Manual: Certificate of Chief Timekeeper  I hereby certify that as the Chief Timekeeper duly appointed at the above mentioned meet  a) I personally examined the faces of the watches at the conclusion of the event in respect of which the record is hereby claimed  b) That the watches were not cleared until authorised by me  c) That the times shown on the faces of the respective watches were  Watch 1 Watch 2 Watch 3							
mins	secs	mins		secs	mins	secs	
d) That the time as mins	s computed by me in secs Signe		e with SNZ	rules was		Chief T/K	
Automatic: Certificate of AOD Operator							
Official Time	mins	secs	Signed:			Chief AOD	
FOR OFFICE USE ONLY:			Existin	Existing Record:			
Date application received:			Date de	Date dealt with:			
Decision:			Date Ce	Date Certificate issued:			
P O Box 300 633, Albany							

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