

# Application for Recognition of a Relay 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 (in full) of swimmers in order;		Male / Female
Name 1	Name 2	
Name 3	Name 4	
Club:	Signed:	Manager

## RECORD DETAILS

Distance:		Date
Classification: Open, U16, U14, U12, U10 LC		Style: Freestyle / Medley
Time:	Mins	Secs
		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

- I personally examined the faces of the watches at the conclusion of the event in respect of which the record is hereby claimed
- That the watches were not cleared until authorised by me
- That the times shown on the faces of the respective watches were

Watch 1		Watch 2		Watch 3	
mins	secs	mins	secs	mins	secs

- That the time as computed by me in accordance with SNZ rules was

mins      secs      Signed: \_\_\_\_\_ Chief T/K

## Automatic: Certificate of AOD Operator

Official Time      mins      secs      Signed: \_\_\_\_\_ Chief AOD

## FOR OFFICE USE ONLY:

## Existing Record:

Date application received:

Date dealt with:

Decision:

Date Certificate issued: