

LIFESAVING SPORT RECORD APPLICATION

Please complete all *UNSHADED AREAS*

Competition name:

From date:

To date:

Name of pool:

City:

Province:

Host club or affiliate:

Meet Manager:

Name:

Email:

Phone:

25M or

50M

Male or

Female

15-18

Masters:

30-34

35-39

40-44

45-49

50-54

55-59

Open

60-64

65-69

70-74

75-79

80-84

85-89

Age Group

| Competitor's name | Birth date YYMMDD | Affiliate club | Distance | Event | Record | Official time |
|-------------------|----------------------|----------------|----------|-------|------------------------|------------------|
| | | | | | Provincial Canadian | |
| | | | | | Provincial Canadian | |
| | | | | | Provincial Canadian | |
| | | | | | Provincial Canadian | |

For relays, list all competitors' names and birth dates, and use a separate application form for each relay team. An electronic timing system with back up or 3 *certified* timers per lane are required to set a record.

For Canadian Championships and Lifesaving World Championships, the signature of a Canadian official who witnessed the record and a copy of the official event results attached to this application is acceptable proof of an official time.

For Provincial Championships and sanctioned Club Competitions, the undersigned officials hereby validate the official time of the applicant(s). We confirm that the meet was duly sanctioned and advertised, and we certify that all Lifesaving Society rules and regulations relating to the establishing of the record were observed. A copy of the official time report* is attached.

| | Name (print) | Signature | Phone |
|--|--------------|-----------|-------|
| Meet referee or Canadian Official | | | |
| Head scorer (Prov /Club Comps only) | | | |

Instructions:

1. Compile the following documentation. All three components are required for record approval.

| | | NSO or PSO use only | |
|--|---|---------------------|----------|
| | | Date confirmed | Initials |
| | Competitive Lifesaving Record Application form completed in full, including signatures. | | |
| | Copy of official results for the events in which the record was established. | | |
| | *Proof of time – copy of electronics tape/report, or if using certified timers, copy of the timers' record. | | |

2. For national records, forward the documentation to: Support Services Chair, National Sport Commission, c/o Lifesaving Society, 400 Consumers Rd, Toronto, ON M2J 1P8. Confirmation will be sent to the appropriate Provincial Branches.
3. For provincial records, forward the documentation to the appropriate Lifesaving Society provincial branch office.

| Application approval (NSO or PSO use only) | | | | |
|--|----------|-----------|---------------|-----------------------|
| | | | | |
| Name (print) | Position | Signature | Date approved | Date certificate sent |