



APPLICATION FOR MASTERS COMBINED EVENTS RECORD

Print legibly. Submit documentation to: Jeff Brower, 10708 Hastings Lane, Austin, TX 78750
Electronic submissions are allowed. Complete instructions are at www.usatfmasters.org/records

1. Athlete Information Last Name _____ First Name _____ Middle _____
Address _____ City _____ State _____
Zip Code _____ Phone _____ Email _____
Date of Birth ____/____/____ Check one Male Female Club _____

2. Description of Record Check one World American Age group _____ Check one Indoor Outdoor
Event _____ Date _____ Time of Day _____ POINTS:
Sanctioned Meet Name _____ Hurdle Distance/Height _____
Facility Name _____ City _____ State _____ USA

3. Starter's Certificate – As the Starter, I certify that the start of all races were in accordance with USATF Rules.
Printed Name _____ Signature _____ USATF Cert # _____

4. Automatic Timing Certificate A fully automatic timing device was used (manufactured by _____)
As Chief Photo Finish Judge, I certify that the official times recorded were:
100 _____ 200 _____ 400 _____ 800 _____ 1000 _____ 1500 _____ Hurdles _____
Printed Name _____ Signature _____ USATF Cert # _____

5. Wind Gauge Certificate As the Wind Gauge Operator, I certify the force of the following wind as (+ or -/meters/s):
100 _____/_____ 200 _____/_____ Hurdles _____/_____ Long Jump _____/_____
Printed Name _____ Signature _____ USATF Cert # _____

6. Field Judge Certification: I certify that the measurements stated are exact as measured in accordance with USATF or WMA Rules. I certify that the circle, sector and runway is in compliance with WMA or USATF specifications.
Official height/distances: High Jump _____ Pole Vault _____ Long Jump _____
Shot Put _____ Discus _____ Hammer _____ Javelin _____ Weight _____
Name (PRINT): _____ Signature: _____ USATF Cert # _____

7. Implement Certification: I certify that I weighted and measured the implement(s) used for the claimed record in accordance with WMA or USATF Rules and the implement(s) conform exactly to WMA Rules.
Implement weight: Shot Put _____ Discus _____ Hammer _____ Javelin _____ Weight _____
Name (PRINT): _____ Signature: _____ USATF Cert # _____

8. Guarantee by Referee I certify that all information recorded on this form is accurate, that the Officials conducting the event were duly qualified and that all WMA or USATF Rules of Competition were complied with.
Printed Name _____ Signature _____ USATF Cert # _____

9. Also Provide: All Photo Finishes FAT Zero Control Test Meet Program Complete Meet Results
 Official Field Event sheets Proof of Age (Birth Certificate or Passport)