

Record Application Form Relays Event

| Application Data | Men Women Mixed |
|--|---|
| Event: | Men Women Mixed |
| Record Time Claimed : | |
| Full Name of Athlete | Date of Birth Gender Club Startnumber |
| | |
| | |
| | |
| Name of the Competition : | |
| Date of the Event : / / Name of the | Standium : |
| Date of the Event: / / Name of the | stadium. |
| , , | Country: |
| City: Judges | |
| City: | |
| Judges Reaction Time (if applicable): | M/Sec Country: |
| Judges | M/Sec Country: |
| Judges Reaction Time (if applicable): We declare that all information is correct and in | M/Sec onformity with the World Athletics rules |
| Judges Reaction Time (if applicable): We declare that all information is correct and in Starter Name : | M/Sec onformity with the World Athletics rules Signature: |

Please send these application to Belgian Athletics and your regional league within 30 days following the competition.

Signature:

Vlaamse Atletiekliga: resultaten@atletiek.be

Referee Name:

Ligue Belge Francophone d'athlétisme : info@lbfa.be

Belgian Athletics: info@belgian-athletics.be