



# SWIMMING RECORD APPLICATION FORM

## PART A: CLASS OF RECORD

BAHAMAS                       BAHAMAS OPEN                       BAHAMAS NATIONAL CHAMPIONSHIPS  
 AGE GROUP                       OPEN                       MASTERS                       GIRLS FEMALE                       BOYS MALE  
 8 & UNDER                       9 - 10                       11 - 12                       13 - 14                       15 & OVER                       OTHER: \_\_\_\_\_

## PART B: STROKE AND LENGTH OF EVENT

FREESTYLE                       BACKSTROKE                       BREASTSTROKE                       BUTTERFLY                       MEDLEY  
 25m                       50m                       100m                       200m                       400m                       800m                       1500m

## PART C: SWIMMER INFORMATION/RELAY TEAM INFORMATION [IN ORDER OF COMPETING]:

SWIMMER 1: \_\_\_\_\_ CLUB: \_\_\_\_\_ BSF REG.#: \_\_\_\_\_  
 SWIMMER 2: \_\_\_\_\_ CLUB: \_\_\_\_\_ BSF REG.#: \_\_\_\_\_  
 SWIMMER 3: \_\_\_\_\_ CLUB: \_\_\_\_\_ BSF REG.#: \_\_\_\_\_  
 SWIMMER 4: \_\_\_\_\_ CLUB: \_\_\_\_\_ BSF REG.#: \_\_\_\_\_

## PART E: RACE AND LOCATION INFORMATION

DATE OF RECORD: \_\_\_\_\_ NEW RECORD TIME: \_\_\_\_\_  
 TIMING EQUIPMENT MANUFACTURER:                       COLORADO                       OMEGA                       DAKTRONICS                       \_\_\_\_\_  
 CITY ISLAND: \_\_\_\_\_ MEET ORGANIZER: \_\_\_\_\_  
 LENGTH OF POOL:                       25-METRE                       50-METRE  
 POOL NAME: \_\_\_\_\_  INDOOR POOL                       OUTDOOR POOL

## PART F: DOPING CONTROL INFORMATION

DID THE SWIMMER(S) SUBMIT TO DOPING CONTROL WITHIN 24 HOURS AFTER THE RACE?                       YES                       NO  
 LOCATION OF DOPING CONTROL: \_\_\_\_\_  
 NAME OF DOPING CONTROL SUPERVISOR: \_\_\_\_\_

## PART G: DECLARATION

IN MY OPINION ALL APPLICABLE BSF SWIMMING RECORDS RULES AND OR FINA RULES HAVE BEEN COMPLIED WITH AND THIS APPLICATION IS ACCOMPANIED BY THE CERTIFIED OFFICIAL MEET EVENT RESULTS.

\_\_\_\_\_ \* \_\_\_\_\_  
 NAME OF REFEREE or NATIONAL TEAM MANAGER                      SIGNATURE OF REFEREE or NATIONAL TEAM MANAGER

### FOR BSF RECORDS COMMITTEE USE ONLY

APPLICATION WAS:  INVESTIGATED & APPROVED                       CERTIFICATE PREPARED & ISSUED                       REJECTED                       DEFERRED

REASON(S) FOR REJECTION DEFERRAL: \_\_\_\_\_

I CONFIRM THAT THIS APPLICATION SATISFIES ALL APPLICABLE BSF SWIMMING RECORDS RULES AND OR FINA RULES.

\* \_\_\_\_\_ DATE \_\_\_\_\_  
 FOR BSF RECORDS COMMITTEE