

## **Application for National or Provincial RELAY Record**

The following officials hereby validate the record breaking performance of the applicants. The meet was duly sanctioned and advertised, and we certify that all Rules of Swimming Canada, relating to the establishing of a record, were observed.

Officials Information:		
Meet Manager	Referee	
Name:	Name:	
Email:	Email:	
Meet Information:		
Competition Name:	□ LC □ SC	
Dates of Competition:	Host Club:	
Event Venue:	City, Province:	
Swim Wear Declaration: Swim wear worn by the athlete	conforms to current SNC and FINA requirements. Enclose one of the	
following;		
Finalist Swim Wear Declaration List (as used for Finals at SNC Designated competitions)		
OR Individual Swim Wear Declaration Form		
Relay Application: Age Group Record Sen	ior Record   🛛 National Record 🗖 Provincial Record	
Swimmer Name:	Age:	
Swimmer Name:Swimmer Name:		
	Age:	
Swimmer Name:Swimmer Name:	Age: Age:	
Swimmer Name:Swimmer Name:	Age: Age: Age:	
Swimmer Name: Swimmer Name: Swimmer Name: Swimmer Name:	Age: Age: Age:	
Swimmer Name:Swimmer Name:Swimmer Name:Swimmer Name:Gender:Club/Team:	Age: Age: Age:	

## The record application form and required paperwork must be submitted within 7 days of performance.