

Bedfordshire ASA Masters Relay Record Claim Form

Person submitting the claim

Forename: _____ Surname: _____

Address: _____

Postcode: _____

Contact Telephone number _____

I hereby claim the following Bedfordshire ASA Masters Record:

Male/Female/Mixed	Long course 50m/ short course 25m	Medley/Freestyle	Distance	Age Group

The following relay team, shown in race order, are all ASA Category 2 members and members of _____ Club which is affiliated to Bedfordshire ASA:

	Name of swimmer	Date of birth	ASA No
1.			
2.			
3.			
4.			

The above team equaled or bettered the existing record whilst competing at the following event:

Name of Meet: _____

Venue: _____ Date of swim: _____

Pool Length: _____ Recorded Time _____

The official results of this meet can be found on line at the following address:

Where the official results are not published on the internet a copy of the results and any other supporting documentary evidence should support all claims. If the record is set at an event when AOE is **not** in use the claim should be certified as correct by the lead referee, **who should complete the following section.**

This I certify the time is the official time for the named swimmer. Two ASA registered timekeepers were used.

Referee's Name _____ ASA Membership Number _____

Signature _____ Date _____

Please send this completed form with any supporting documentation to the Bedfordshire County ASA Masters Records Officer by email to: john.bellis123@btinternet.com (or by post to: Mr John Bellis. 348 Shenley Wood Village. Chalkdell Drive. Shenley Wood. Milton Keynes. MK5 6GN.)