 **Association of Canadian Ultramarathoners**

**Association canadienne des ultra-marathoniens**

**RECORD APPLICATION**

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| --- | --- | --- | --- |
| **ATHLETE** | Name: | Male / Female  (circle one) | |
| Address: | | |
| Date of birth (dd/mm/yyyy): | | Age Group: |
| Email: | | |
| Nationality (attach copy of passport or birth certificate): | | |
| **EVENT** | Name: | | |
| Location (City, Province/State, Country): | | |
| Date(s) of race (dd/mm/yyyy): | | |
| Event distance or event duration: | | |
| **COURSE**  ***Please send a copy of the course map & course certification with this application*** | Point to Point / Out and back / Single Loop / Multi Loop  (circle one) | | |
| If multi-loop, state loop distance (note metric or imperial): | | |
| Surface held on (road or track): | | |
| Course measured by (name/organisation): | | |
| Method used: | | |
| Certificate number (attach a copy): | | |

|  |  |
| --- | --- |
| **RESULT**  ***Please send a copy of complete race results listing all racers*** | Record(s) claimed (Open/Age Group plus distance/time):  For multi lap course provide copy of lap sheets. |
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In the event of a multi-loop course where a partial final loop was added to the end result, additional information must be provided as follows:

**Measurement of partial lap**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Measurer's  name | Grade/level  National Body’s Licence number | Measurer's signature | Measured distance rounded down to  nearest cm. | Method of measurement & accuracy |
|  |  |  |  |  |

In the event of chip/electronic timing, the operator’s certification must be provided as follows:

|  |  |  |
| --- | --- | --- |
| Operator’s name | Relevant Qualification | System name and company  providing the service. |
|  |  |  |

**TIMING OFFICIAL’S AFFIDAVIT**

I confirm that the electronic system operated correctly throughout the race and that the times shown are “gun” times.

Email address of timing official: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RACE DIRECTOR’S AFFIDAVIT**

To the best of my knowledge and belief:

1. The course was accurately measured to World Athletic standards for record purposes (including limitations on elevation change and separation for road courses) and there is no reason to doubt that the above athlete ran the full course as measured.
2. The time/distance recorded for the athlete is accurate (the timer and distance were accurate and there is no reason to doubt that the above time/distance was correctly assigned to the above athlete).
3. There is no reason to believe that the athlete was unfairly aided (e.g., pacing or assistance by a non-competitor, illegal assistance from another competitor, etc).
4. In general, the times of athletes competing in the race were consistent with their normal level of performance (i.e., there is nothing to suggest anything untoward about the race results in general).

If the race director has any comments, concerns or reservations in answering affirmatively to the above, please comment on the bottom of this form.

|  |
| --- |
| Name of race director: |
| Address: |
| Email: |
| Phone: |
| Signature: |

*return to: ACU records officer,* *e-mail:* records@canultra.ca

ACU strongly prefers that applications are received by email from the race director (RD) rather than the athlete, although the athlete may complete portions of the application in advance for the race director. Applications received by an athlete will require confirmation from the RD that the application was not altered.