To:
Helena Maria da Silva Carvalho, EVAA Acting Secretary, Rua Sà Caneiro, lote 6-5º esq. PT 3000-194 Coimbra (Portugal) – e.mail: helena@evaa.ch

**EUROPEAN VETERANS ATHLETIC ASSOCIATION - EVAA**

**Application for European Age-Group Record or Best Performance**

(Please type or use capital throughou)

<table>
<thead>
<tr>
<th>Event</th>
<th>Indoor</th>
<th>Outdoor</th>
<th>Age Group</th>
<th>Men - Women</th>
</tr>
</thead>
</table>

The Full Name of Competitor(s)... ............................................................................................................................

Date(s) of Birth...................................................................................................................................................................
(For relays, full name of each team member is required, in order of running)

Competitor's Country........................................................................................................... Date of Meeting..........................................................................................................................

Name of Stadium....................................................................................................... Meet Place....................................................... Country..........................................................................................................................

**RESULT OF COMPETITION**

The names of the first three competitors in the same event and their performances were as follows:

1st................................................................................................... Performance ......................................................................................

2nd................................................................................................... Performance ......................................................................................

3rd................................................................................................... Performance ......................................................................................

**Running Events or Track Walk - Chief Officer’s Certificate**

I hereby certify that the start of the performance was in accordance with IAAF/WMA Rule and that the time set opposite my signature was the exact time recorded by watch (Hand Timing) or by Fully Automatic Timing. For 100m, 200m, 400m, 800m and Hurdle distances, Fully Automatic Timing must be used.

HURDLES: The hurdle height used was _____ and that hurdle spacing was as WMA.

Record ................................................................................................... Performance ......................................................................................

Name................................................................................................... Signature..........................................................................................

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**Wind Gauge**

(for 100m, 200m, the short hurdles distances, long jump and triple jump).

I hereby certify that wind speed in direction of running was:

Event:.................................................................................................................. Meters/Seconds..................................................

Name ................................................................................................... Signature..........................................................................................

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**High Jump - Long Jump - Triple Jump - Pole Vault: Chief Officer’s Certificate**

I hereby certify that the measurement stated opposite my signature is exact measured in accordance with the relevant IAAF/WMA Rules for veteran competition. State also the weight and that the runway/sector/equipment comply with IAAF/WMA specifications:

Record ................................................................................................... Performance ......................................................................................

Name................................................................................................... Signature..........................................................................................

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**Shot - Discus - Hammer - Javelin - Weight: Chief Officer’s Certificate**

I hereby certify that the Shot/Discus/Hammer/Javelin/Weight used in the record claimed has been examined after performance and confirms exactly with the relevant IAAF/WMA Rules for veterans competition. State also the weight and that the circle/runway/sector/equipment comply with IAAF/WMA specifications:

Record ................................................................................................... Performance ......................................................................................

Weight.........................................................................................................................

Name................................................................................................... Signature..........................................................................................
Decathlon - Heptathlon - Pentathlon: Chief Officer's Certificate of Combined Events

<table>
<thead>
<tr>
<th>Combined</th>
<th>Event</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>2°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>3°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>4°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>5°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>6°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>7°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>8°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>9°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
<tr>
<td>10°Event</td>
<td>Performance</td>
<td>Wind (if the case)</td>
</tr>
</tbody>
</table>

I hereby certify that the results of each combined event was obtained in accordance with the relevant IAAF/WMA Rules for veteran competition.

Name  Chief Officer................................................................. Signature.................................................................

Throw Pentathlon – Chief Officer’s Certificate of Combined Events

<table>
<thead>
<tr>
<th>Points</th>
<th>Combined</th>
<th>Event</th>
<th>Weight</th>
<th>Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hammer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shot Put</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discus</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Javelin</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weight Throw</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

I hereby certify that the results of each combined event was obtained in accordance with the relevant IAAF/WMA Rules for veteran competition.

Name  Chief Officer................................................................. Signature.................................................................
BEST PERFORMANCE
Road Running (10 km - Half Marathon - Marathon) and Road Walk (10 km - 20 km - 30 km)
Chief Officer's Certificate

I hereby certify that the start of the performance was in accordance with IAAF/WMA Rule and that the time set opposite my signature was the exact time recorded by watch (Hand Timing) or by Fully Automatic Timing or by Transponder Timing.

I hereby certify that the Race Course was measured as per IAAF/WMA Rule 260.28 and 260.29.

Event.............................................................................................................................................................. Performance ..............................................................................................................................................................

Name  Chief Officer........................................................................................................................................ Signature......................................................................................................................................................

Name  Official Measurer ................................................................................................................................. Signature......................................................................................................................................................

Timing System (fill in where the case)

Hand Timing  Fully Automatic Timing  Transponder Timing (chips)

NOTE:
A copy of “photo finish” and “zero control test” (for events with Fully Automatic Timing) and the Results Card or a copy of the Official Result List must be included with this application!