

# EUROPEAN MASTERS ATHLETICS - EMA

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



(Please type or use capital throughout)

To:

**Helena Maria da Silva Pires de Carvalho, EMA Secretary,**  
**Rua Sá Carneiro, lote 6-5º esq. PT 3000-194 Coimbra**  
**(Portugal) – e.mail: [helena@european-masters-athletics.org](mailto:helena@european-masters-athletics.org)**

**Event** ..... **Indoor** ..... **Outdoor** ..... **Age Group** ..... **Men - Women** .....

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.....

### 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.....

### 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.....

### 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.....

### 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.....

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**Decathlon - Heptathlon - Pentathlon: Chief Officer's Certificate of Combined Events**

Combined Event..... Points.....

1°Event..... Performance..... Wind (if the case).....

2°Event..... Performance..... Wind (if the case) .....

3°Event..... Performance..... Wind (if the case) .....

4°Event..... Performance..... Wind (if the case) .....

5°Event..... Performance..... Wind (if the case).....

6°Event..... Performance..... Wind (if the case) .....

7°Event..... Performance..... Wind (if the case) .....

8°Event..... Performance..... Wind (if the case) .....

9°Event..... Performance..... Wind (if the case) .....

10°Event..... Performance..... Wind (if the case) .....

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.....

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**Throw Pentathlon – Chief Officer's Certificate of Combined Events**

Points Combined Event.....

Hammer	Weight.....	Performance.....
Shot Put	Weight.....	Performance.....
Discus	Weight.....	Performance.....
Javelin	Weight.....	Performance.....
Weight Throw	Weight.....	Performance.....

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.....

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**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

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 !