

Oxfordshire & North Buckinghamshire Counties ASA

Affiliated to ASA South East Region

County Record Claim Form

Before completing this form, please read the rules pertaining to claiming county records.

Section 1 (To be completed for all claims)

Category (please tick relevant boxes)

Age Band	Junior		Open	
Sex	Male		Female	
Short/Long Course	Short		Long	

Event Details

Stroke..... Distance.....

Full name of swimmer(s)	Date of Birth	Club

Competition

Name of Gala/Championship			
Pool		Pool Length	
Date of Swim		Time Achieved	
Timing	Manual	Electronic	

Club Secretary..... Name.....

Section 2 (For non licensed meets)

I certify that the above time was recorded at an event run in accordance with ASA Law and Technical Rules of Racing with, if manual times were used, a minimum of two recorded times for the swim.

Referee Signature..... Name.....

Referee Qualifications (Please delete those that do not apply)

Referee/Starter/Judge/Timekeeper

Completed forms should be forwarded to the County Records Officer.

Peter Shaw, 8 River View Terrace, Abingdon, Oxon, OX14 5GL