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| **National and Provincial Masters Record Application**  |
| **Type of record application** (please mark with X) | National record |  |
| Connacht |  | Leinster |  | Munster |  | Ulster |  |
| **Swimmer Personal Information** |
|  | **Name** | **Date of Birth** | **Swim Ireland ID** |
| Swimmer 1 |  |  |  |
| Swimmer 2 |  |  |  |
| Swimmer 3 |  |  |  |
| Swimmer 4 |  |  |  |
| Club name |  | Age Group |  |
| Gender | Male |  | Female |  |
| Swimmer’s Address(Club Address for Relay) |  |
| Email |  |
| Phone number |  |
| Signature |  |
| **Competition Details** |
| Competition name |  |
| Venue (incl. address) |  |
| Date of Competition |  |
| Competition organiser |  |
| Lead referee name |  |
| Event Distance & Stroke |  | Official Time |  |
| Pool format | Long Course (50m) |  | Short Course (25m) |  |  |
| Timing System | Automatic |  | Semi-Automatic |  | Manual |  |
| Manual Times only | 1. | 2. | 3. |
| Please send this form to the appropriate Masters Recorder**National Recorder** Swim Ireland (Damian Ball) - mastersrecorder@swimireland.ie**Leinster & Munster** (Damian Ball) - mastersrecorder@swimireland.ie**Connacht Recorder**Brian Desmond - briandes.mond@yahoo.ie**Ulster Recorder**Alan McMullan – alan.mcmullan@ukgateway.netPlease ensure that the Application complies fully with the “Masters Record Application Rules National and Provincial”. A copy of these Rules is available on the Irish Masters web site [www.irishmastersswimming.ie](http://www.irishmastersswimming.ie)  |
| **For internal use of Swim Ireland Masters Recorders** |
| Date Received |  | In case of non-approval, state the reasons: |
| Approved | Yes |  | No |  |
| Date Approved |  |