

Corby ASC - Club Record Application Form

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| **Date of Claim** | - |
| **Full Name** | **ASA Number** |
| - | - |
| **Club Membership Number** | **Email Address** |
| - | - |
| **Date of Birth** | **Age on day of event** |
| - | - |

**Record Applied For**

|  |  |
| --- | --- |
| **Distance & Stroke** | **Long Course/Short Course** |
| - | - |
| **Gala** | **Licence No.** |
| - | - |
| **Date of Gala** | **Venue** |
| - | - |
| **AOE Time** | **Manual Time (if required)** |
| - | - |

|  |
| --- |
| For Club Use |
| **Time Registered in ASA Rankings** |

**Claim Approved Yes/No Signature**