



**INTERNATIONAL BLIND SPORTS FEDERATION**

**APPLICATION FOR A WORLD RECORD**

(Please complete in CAPITALS or type in ENGLISH)

Application is hereby made for a World Record, in support of which the following information is submitted:

NAME OF COMPETITOR:

.....  
(First) (Middle) (Last)

VISUAL CLASSIFICATION (circle one): B1 B2 B3

SEX (circle one): M F

COMPETITOR'S COUNTRY: .....

SPORT: .....

EVENT: .....

DATE: ...../...../..... (Day/Month/Year)

LOCATION OF COMPETITION:

.....  
(Town) (County or State) (Country)

**B. TIME KEEPER'S/JUDGE'S CERTIFICATE**

We certify that the times/distances stated opposite our signature are exact.  
We also certify that the time/distance was taken in accordance with IBSA  
rules and that all implements used comply with prescribed specifications.

.....  
(Time/Distance) (Signature) (Address)

.....  
(Time/Distance) (Signature) (Address)

.....  
(Time/Distance) (Signature) (Address)

Athletics: wind gauge measurement: .....

Swimming: pool length (circle one) 50m 25m

**C. REFEREE'S CERTIFICATE**

I hereby certify that all the information recorded herein is accurate and that  
all the appropriate IBSA rules of competition were complied with.

NAME: .....

SIGNATURE: .....

ADDRESS: .....

**D. RECOMMENDATION BY IBSA MEMBER FEDERATION**

The undersigned, representing an officially recognised IBSA organisation, hereby certifies that he/she is satisfied with the accuracy of the aforementioned statements, confirms that the officials conducting the competition were duly qualified and recommends this application for acceptance.

Signature: .....

Position: .....

Date...../...../..... (Day/Month/Year)

Organisation: .....

Address: .....

**(FOR IBSA OFFICIAL USE ONLY)**

Date ratified: ...../...../.....

Date denied: ...../...../.....

If denied, reasons:

.....  
.....

Signature of IBSA

Official: .....

Date: ...../...../.....

# INTERNATIONAL BLIND SPORTS FEDERATION

## Records for Blind Athletes

### Procedure for Application

1. Applications must be submitted within 3 months of the date of such record.
2. A copy of the Official Programme and Results must be enclosed.
3. Applications must be sent by first class mail to:

**Mr. Mesut Dedeoğlu,  
IBSA Secretary General,  
Ulus İşhanı,  
A Blok Kat 1  
Ulus / Ankara,  
Turkey.**

**Telephone: + 90 312 311 01 64**

**Fax: + 90 312 310 13 65**

**Email: [ibsa.general.secretariat@gmail.com](mailto:ibsa.general.secretariat@gmail.com)**

4. Receipt of application will be acknowledged immediately by the Records Secretary.
5. Records will be presented for ratification to the Sports Technical Committee of the INTERNATIONAL BLIND SPORTS FEDERATION at its next following meeting.
6. Record applications for ratification will be presented ONLY if postmarked before 30 days prior to such meetings. Applications received with later postmarks will be carried forward.
7. The national member organisation concerned will be notified of ratification, or otherwise, as soon as possible after the ratification meeting.
8. The IBSA internet page ([www.ibsa.es](http://www.ibsa.es)) will publish new records as soon as possible after the ratification meeting.