

JUMP RECORD APPLICATION
NATIONAL COLLEGIATE WATER SKI ASSOCIATION
APPLICATION FOR A NATIONAL COLLEGIATE RECORD

For this performance to be considered by the NCWSA Board for a possible national record all requirements as stated in the current NCWSA Official Tournament Rules must be met. Use with and follow instructions in Appendix "B" - VERIFICATION OF NATIONAL RECORDS of the NCWSA Official Tournament Rules in documenting the proposed record performance on this form. (* Each Conference shall approve its own Conference records and may use different rated officials.)

THIS PERFORMANCE (please circle) ESTABLISHES/TIES A NATIONAL COLLEGIATE JUMP RECORD.

Record Performance: Distance _____ feet

Skier _____ School _____
 Skier's permanent address _____ Home phone _____
 City _____ State _____ Zip _____
 Tournament Name _____ Date _____ Class: AWSA/NCWSA "C"
 Tournament location _____ City _____ State & ZIP _____

Course checked: (See Chief Judge's Report attached) _____ Yes _____ No

Timing device(s) checked: _____ Yes _____ No (Please circle) Manual/Automatic

1st segment _____ 2nd segment _____

Tow line and handle removed from tournament use after performance until total length _____ (in feet) checked and in tolerance
 _____ Yes _____ No.

Distance between meters:

A to B _____

B to C _____

A to C _____

Angles Between Meters:

A to B A to C B to A B to C C to A C to B

Lower _____

Upper _____

Sightings to

Ramp From:

A: Lower _____ Upper _____

B: Lower _____ Upper _____

C: Lower _____ Upper _____

Triangle Size from sightings at Ramp _____ feet

Sightings to

15m End Timing Bouy From:

A: Lower _____ Upper _____

B: Lower _____ Upper _____

C: Lower _____ Upper _____

Triangle Size from sightings at 15m End timing bouy _____ feet.

Meter Readings of RECORD jump and resulting triangle:

A: Lower _____ Upper _____ Triangle Produced by jump:

B: Lower _____ Upper _____ in tolerance _____ Yes _____ No

C: Lower _____ Upper _____ size of triangle in feet _____

Ramp checked and within tolerance _____ Yes _____ No. Take-off edge height _____ and length out of water _____.

OFFICIALS: Second meter readers on each station are optional. (List or circle as appropriate)

| | | | | | |
|--------------|-------|---------|----------|-----------|-------|
| Meter A: | _____ | Rating: | _____ | Signature | _____ |
| Meter A: | _____ | Rating: | _____ | Signature | _____ |
| Meter B: | _____ | Rating: | _____ | Signature | _____ |
| Meter B: | _____ | Rating: | _____ | Signature | _____ |
| Meter C: | _____ | Rating: | _____ | Signature | _____ |
| Meter C: | _____ | Rating: | _____ | Signature | _____ |
| Boat Driver: | _____ | Rating: | Rg or Sr | Signature | _____ |
| Boat Judge: | _____ | Rating: | Rg or Sr | Signature | _____ |
| Boat Timer: | _____ | Rating: | A/Rg/Sr | Signature | _____ |
| Scorer: | _____ | Rating: | Rg or Sr | Signature | _____ |

* This performance (please circle) establishes/ties a _____ Conference Collegiate Record.

TO BE READ AND SIGNED BY THE SKIER

I have read and understand the eligibility requirements as written in the current NCWSA Tournament Rules and to the best of my knowledge I am qualified to apply for an NCWSA National Record (or Conference Record) under those rules as of the date of the performance. I understand that all the requirements in the NCWSA Official Tournament Rules for this proposed national record must be met and I have reviewed this record application thoroughly and verify that it is correct to the best of my knowledge.

Skier's Signature _____ AWSA# _____ Date _____

TO BE COMPLETED BY THE TECH CONTROLLER AND/OR CHIEF JUDGE

I certify that the course, equipment, judges, drivers, and all else affecting the validity of this performance as a national record have been checked in accordance with the NCWSA Official Tournament Rules and been found to be in compliance with same.

Technical Controller (if appointed) or Chief Judge:

Printed Name _____ Rating _____

Address _____

City _____ State _____ Zip _____

Area Code/Telephone Number _____ day _____ evening _____

Signature _____ AWSA# _____ Date _____

Chief Judge: After completing this form, please sign, attach required forms (a copy of your Chief Judge's Report, trick pink sheets, jump computer printouts, etc.), and forward to the National Chairman of the NCWSA Board of Directors within 30 days of the performance to be considered by the NCWSA Board for a National Record. THANKS:

If this is a Conference Record, please forward it to your Conference National Director along with the scorebook.

Chief Judge's Printed Name _____ Rating _____ Date _____

Signature _____ Phone _____

DO NOT WRITE BELOW THIS LINE

(to be completed by the NCWSA National Chairman)

Date Application Received: _____ Signature _____

Date Presented to Board: _____ Signature _____

ACTION:

_____ Approved Signature _____ Date _____

Date Certificate Mailed to skier _____

_____ Rejected Date Skier Notified and Reason for Rejection _____