

Please return completed form to  
 Welsh Athletics Cardiff International Sports Campus  
 Leckwith Road  
 Cardiff. CF11 8AZ  
 Tel:- 02920 644870  
 Email:- [competitions@welshathletics.org](mailto:competitions@welshathletics.org)



Licence No

Issued

## UK Athletics & Welsh Athletics

### TRACK & FIELD LICENCE APPLICATION FORM

*Once complete please return to Welsh Athletics*



CONTACT DETAILS										
Name										
Address										
							Post Code			
Email Address										
Home Telephone										
Mobile Telephone										
COMPETITION DETAILS <i>please use the supplementary sheet if you are applying for a series of events. E.g. Leagues</i>										
Event Name										
Promoting Body / Club										
Event Date										
Event Venue										
Indoor or Outdoor										
UKA Venue Certification			1		2		3		4	5
Age Group Range										
Events to be held Track										
Events to be held Field										
<i>Please supply a copy of the event prospectus &amp; Entry Form</i>										
Entry Conditions (if applicable)										
First Aid & Qualification			Attendance		Yes		No			
St Johns			Red Cross		Other					

#### PROPOSED NUMBER OF TECHNICAL OFFICIALS

	Starter	Track	Timekeeper	Photofinish	Field	Race Walk Judge
Level 1						
Level 2						
Level 3						
Level 4						
On behalf of						

*I agree that UK Athletics Rules for Competition (2016) and Paralympic Athletic Rules and Regulations 2016-2017, as Supplemented by specific local competition requirements, will be applied, fully accredited Technical Officials will be appointed and the UK Athletics Code of Practice for the safe conduct of Track & Field Events will be operated at all times.*

SIGNED		PRINT NAME	
OFFICE HELD		DATE	

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### SUPPLEMENTARY SHEET – 1.

<b>COMPETITION DETAILS</b> <i>please use the supplementary sheet if you are applying for a series of events. E.g. Leagues</i>										
Event Name										
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Event Date										
Event Venue										
Indoor or Outdoor										
UKA Venue Certification		1		2		3		4		5
Age Group Range										
Events to be held Track										
Events to be held Field										
<i>Please supply a copy of the event prospectus &amp; Entry Form</i>										
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St Johns		Red Cross		Other						

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**SUPPLEMENTARY SHEET – 2.**

<b>COMPETITION DETAILS</b> <i>please use the supplementary sheet if you are applying for a series of events. E.g. Leagues</i>										
Event Name										
Promoting Body / Club										
Event Date										
Event Venue										
Indoor or Outdoor										
UKA Venue Certification										
	1		2		3		4		5	
Age Group Range										
Events to be held Track										
Events to be held Field										
<i>Please supply a copy of the event prospectus &amp; Entry Form</i>										
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<b>First Aid &amp; Qualification</b>			Attendance		Yes		No			
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**SUPPLEMENTARY SHEET – 3.**

<b>COMPETITION DETAILS</b> <i>please use the supplementary sheet if you are applying for a series of events. E.g. Leagues</i>										
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Promoting Body / Club										
Event Date										
Event Venue										
Indoor or Outdoor										
UKA Venue Certification	1		2		3		4		5	
Age Group Range										
Events to be held Track										
Events to be held Field										
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**SUPPLEMENTARY SHEET – 4.**

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Event Date										
Event Venue										
Indoor or Outdoor										
UKA Venue Certification	1		2		3		4		5	
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Events to be held Track										
Events to be held Field										
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<b>First Aid &amp; Qualification</b>	Attendance		Yes		No					
St Johns		Red Cross		Other						

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