## **U.S. STATE AND NATIONAL RECORD REPORTING FORM**

Note: All USPA records must be submitted to USPA's Competition Department within 30 days of the record performance.

Today's date: Date \	JSPA notified:Date of Reco	ord Performance:
Place of Record Performance:	State:	
Record Holder's First Name: (Attach list if multiple names)	Last Name:	USPA#:
Record Zone  USPA National USPA Open National State  Record Details (Check Appropria	Record Sub-class  Competition (G-1) Performance (G-2)	Record Category  General Female Night Collegiate
Competition Records (G-1)	Collegiate Competition Records (	(G-1) Performance Records (G-2)
Canopy Piloting  ☐ Fastest Speed (Carved 70m) ☐ Greatest Distance (Drag 50m)  Formation Skydiving ☐ 4-way -Longest Sequence ☐ 4-way -Highest Average ☐ 8-way -Longest Sequence ☐ 8-way -Highest Average ☐ 16-way -Longest Sequence ☐ 16-way -Highest Average ☐ 2-way MFS -Longest Sequence ☐ 2-way MFS -Highest Average ☐ 4-way VFS -Longest Sequence ☐ 4-way VFS -Highest Average ☐ 10-way Fastest Time  Speed Skydiving ☐ Fastest Speed ☐ Highest Overall Average ☐ Greatest Distance ☐ Longest Sequence (Acrobatic)	Formation Skydiving  2-way -Longest Sequence 2-way -Highest Average 4-way -Longest Sequence 2-way VFS -Longest Sequence 2-way VFS -Highest Average 6-way Fastest Time  Sport Accuracy Lowest Score after 4 rounds Lowest Score after 3 rounds (Team	Large Formation Sequential Large Formation  Formation Skydiving Full-break Sequential Large Formation Head-down Large Formation Head-down Sequential Large Formation Head-up Large Formation Head-up Sequential Large Formation Large Formation Sequential Large Formation
Accuracy Landing		☐ Consecutive Dead Centers (followed by a miss)
☐ Lowest Score after 10 rounds☐ Lowest Score after 8 rounds (Tean	n)	Speed Skydiving  Maximum Vertical Speed with drogue
Canopy Formation  2-way Sequential –Longest Seque 2-way Sequential –Highest Average 4-way Rotations –Most Formation 4-way Rotations –Highest Average 4-way Sequential –Longest Seque 4-way Sequential –Highest Average	ge is e ence ge	<ul> <li>☐ Maximum Vertical Speed without drogue</li> <li>Wingsuit Flying</li> <li>☐ Greatest Distance</li> <li>☐ Large Formation (No Grip)</li> <li>☐ Horizontal</li> <li>☐ Vertical</li> <li>☐ Large Formation (Grip)</li> <li>☐ Longest Time</li> </ul>

## **Record Participant List**

Signature: \_\_\_\_\_

Visit <a href="https://uspa.org/Competition/Lookup-Competitors-Participants">https://uspa.org/Competition/Lookup-Competitors-Participants</a> and provide XLS file, or attach via separate page. Must include name(s) of participant(s), gender(s), USPA (or other country's) membership number and date of expiration. Please note, this link is only accessible to Official Observers (See SCM 3, 2.9).

## Certification

Note: At least two certifying officials are required for a state record, and at least three certifying officials for a national record. Discipline-specific records require a judge rated in that discipline; however, a second judge, one not discipline-rated, can serve as the second authorized official. See SCM 3, 2.9 for a more complete explanation. FAA-rated pilots may ONLY certify exit altitude and most jumps in a 24-hour period record claims. For large formation records, a plan of the jump and list of participants must be submitted to the observing judge before the jump; the formation must be completed as planned.

We, the undersigned, certify the claimed record performance. The attempt was made in accordance with the regulations and rules of the USPA Skydiver's Competition Manual. A jump plan and video/photographic evidence of the jump, as required, have been provided and verified.

Names & sig	natures	of rated judge	e(s); S&T <i>A</i>	A, USPA Board member or	staff member; FAA-rated pilot (as authorized):		
						п	on-site official
Print name, ji	udge rating	g (or official desi	gnation) & 1	USPA/Pilot#		. —	on sice official
 Signature							
							on-site official
		g (or official desi				-	
 Signature							
							on-site official
		g (or official desi				_	
 Signature							
State		National		Record Certificates	Send Record Certificate(s) to:		
Individual \$50	Team \$100	Individual \$100	Team \$200	Per Certificate \$10	Name		
☐ Nation☐ State R	al Record ecord State: _				Address		
Total Fee:					City		
Check: Check amount:Check number:			Check nui	State: Zip:			
Credit: 🗆 V		MasterCard credit card i	□ Dis <b>nformati</b>		540) 604-9740 ext 332 to provide payment after	r sub	mission.
<b>~</b> !				3	When you provide a check as payment, you authorize us either to use informatime electronic fund transfer from your account or to process the payment as a formation from your check to make an electronic fund transfer, funds may be you	tion fro	m your check to make a one transaction. When we use ir