

COMPETITION SHOES RECEIPT

Event		Date	
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Member Federation of the Athlete:	
First Name:	
Last Name:	
Gender:	
Finishing Position:	

This is to confirm that the competition shoes belonging to the above athlete have been taken by the organizers for the purpose of checking compliance with World Triathlon Competition Rules.

Details of Shoes

Company	
Model	
Size	
Colour	

The shoes will be kept under custody by World Triathlon and the outcome of the testing by the independent laboratory will be notified to the athlete's Member Federation in due course. Please note that to confirm compliance with the requirements set out in the World Triathlon Competition Rules the further tests carried out by the independent laboratory may include the shoes being cut up.

Date:

First/Last Name (World Triathlon Head Referee):

Signature (World Triathlon Head Referee):