



APPLICATION FOR RECORDING A MARATHON SWIM
INTERNATIONAL MARATHON SWIMMING HALL OF FAME
AT THE
INTERNATIONAL SWIMMING HALL OF FAME
ONE HALL OF FAME DRIVE
FT. LAUDERDALE FL 33316

TO: Dale Petranech, Secretary
International Marathon Swimming Hall of Fame
23 Pine Avenue
Hammonton NJ 08037
E Mail DPETRANECH @AOL.COM Telephone 1-609 561 1878

I would like to register and record my swim with the International Swimming Hall of Fame.

Date of Application _____ Date(s) of Swim _____

BIOGRAPHICAL INFORMATION

Name _____ Date of Birth _____ Sex _____

Home Address _____

Nationality _____ Telephone _____ FAX _____

E Mail _____ Height _____ Weight before swim _____ after _____

SWIM INFORMATION ON BODY OF WATER

Name of body of water _____

From: _____ To _____ Distance _____ Kms/Miles
(Land Mass, Cities, Countries etc)

Water Temperature _____ Start Time _____ Finish Time _____ Total Time _____

Describe water and other factors affecting swim i.e. Swim with or against currents and tides? Speed of water. Calm seas or heavy surf. Wind with/against swimmers? Escort craft used. Other factors that assist or hinder the swim.

Describe feeding during swim. What is taken for nourishment? How often? Length of feeding break. Etc.

Please answer following questions:

1. Did swimmer wear a wet suit? Yes () No ()
2. Did swimmer wear a neoprene headgear? Yes () No ()
3. Did swimmer use hand paddles, fins or other items to increase propulsion? Yes () No ()
4. Did you use grease? Lanolin, Vaseline or other, entire body or just arm pits/groin? Yes () No ()

Explain in detail all yes answers:

Please use additional sheets if necessary

5. Did swimmer use a shark cage? Yes () No (). If yes describe cage including the dimensions and method of propulsion. Was protective mesh for jellyfish used?

Please use additional sheets if necessary

Please include any other information and explain any other deviations from the English Channel rules that will help document and explain the uniqueness of your swim.

Please use additional sheets if necessary

Please provide contact information of the following:

Position	Name	Contact Information (Phone/E-mail)
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Swimmer	_____	_____
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Coach/Trainer/Escort	_____	_____
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Escort Craft Captain	_____	_____
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Support Crew Member	_____	_____
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Witness	_____	_____
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Print and sign

I affirm that the statements made above are true to the best of my knowledge.

I request that a certificate indicating the swim has been recorded in the International Swimming Hall of Fame Archives be sent to me () or not be sent ().

Swimmer's Signature

Date