

**New Mexico Activities Association**  
**2019 NMAA State Track and Field Championships**  
**University of New Mexico Track & Field Complex**  
**Qualifying Results Form**

**Date of Meet:** \_\_\_\_\_ **Name of Meet** \_\_\_\_\_

**Gender (circle one):** Boys or Girls **Host School:** (School Name) \_\_\_\_\_

**Host Coach Name:** \_\_\_\_\_ **Host Coach Phone Number:** \_\_\_\_\_

**Certified Officials Name:** \_\_\_\_\_ **Certified Officials Signature:** \_\_\_\_\_

**\*Please indicate timing system used.\***

<b>FAT Used</b>	<b>Yes or No</b>		<b>Hand Held Used &amp; Converted</b>	<b>Yes or No</b>	
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INDIVIDUAL RUNNING EVENTS					
EVENT	ATHLETE NAME	SCHOOL	CLASS	TIME	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

RELAY EVENTS				
EVENT	SCHOOL	CLASS	TIME	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

FIELD EVENTS				
EVENT	ATHLETE NAME	SCHOOL	CLASS	DISTANCE or HEIGHT
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**IMPORTANT:** Each Qualifying Meet Host must send or fax this form, signed by the meets Certified Official to Chris Kedge within seven (7) calendar days after the conclusion of the meet to: New Mexico Activities Association, Attn: Chris Kedge, 6600 Palomas NE, Albuquerque, New Mexico 87109      \*Phone Number: Chris Kedge Office # (505) 923-3276      Fax # (505) 923-3114 or email to [chris@nmact.org](mailto:chris@nmact.org)