



**APPLICATION FOR ATHLETE  
REPRESENTATION**

**ANGLO CELTIC PLATE 100K 2026**

**Name:**

**DOB:**

**ANI/AAI Membership No:**

**Club:**

**Coach:**

**Email:**

**Telephone:**

**Address:**

**1. (a) Please tick County of Birth *or continue to 1.(b)***

- |                     |                          |
|---------------------|--------------------------|
| Antrim              | <input type="checkbox"/> |
| Armagh              | <input type="checkbox"/> |
| Cavan               | <input type="checkbox"/> |
| Donegal             | <input type="checkbox"/> |
| Down                | <input type="checkbox"/> |
| Fermanagh           | <input type="checkbox"/> |
| Londonderry / Derry | <input type="checkbox"/> |
| Monaghan            | <input type="checkbox"/> |
| Tyrone              | <input type="checkbox"/> |

**1. (b) Please tick parent's county of birth *or continue to 1 (c)***

- |                     |                          |
|---------------------|--------------------------|
| Antrim              | <input type="checkbox"/> |
| Armagh              | <input type="checkbox"/> |
| Cavan               | <input type="checkbox"/> |
| Donegal             | <input type="checkbox"/> |
| Down                | <input type="checkbox"/> |
| Fermanagh           | <input type="checkbox"/> |
| Londonderry / Derry | <input type="checkbox"/> |
| Monaghan            | <input type="checkbox"/> |
| Tyrone              | <input type="checkbox"/> |

**1. (c) Please attach proof of Ulster residency for the past 12 months.**

- |                             |                          |
|-----------------------------|--------------------------|
| Proof of residency attached | <input type="checkbox"/> |
|-----------------------------|--------------------------|

**2. (a) Please complete below with best race times from the past three years:**

	Date	Event	Time	Results Link
Marathon				
50k (road)				
50k (trail)				
100k				

**2. (b) Please complete below with details of looped ultra event experience from the past three years:**

Date	Event	Distance	Time	Results Link

**3. (c) Please provide details of any other ultra events completed within the past three years:**

Date	Event	Distance	Time	Results Link

**I acknowledge should my application be successful representation will be on a self funded basis.**

**Please return completed form along with any supplementary Coach references if desired by email to Susan McCartney (NIURA) by Sunday 11<sup>th</sup> January 2026**

**Email: [susan.macartney@outlook.com](mailto:susan.macartney@outlook.com)**