




2010 WISCONSIN HIGH SCHOOL POWERLIFTING CHAMPIONSHIPS ENTRY FORM					
Name:		High School:		Age:	
D.O.B / /	Sex (circle) M F	E-Mail:		Phone # () -	
Street:		City:	State:	Zip:	
Weight Class:			USAPL Card #		
QUALIFYING MEET ***** BELOW INFORMATION MUST BE FILLED OUT					
Date of Meet:		Location:		Qualifying Total:	
Team Represented:			WHSPA Member Coach		Grade:
  					

In consideration of your accepting this entry, I hereby for myself and my heirs, release any & all rights for damages for injuries I may have against the WHSPA, the host schools, and any / all other meet associates, staff, spotters, loaders, all sponsors, referees as a result of my traveling to, and/or participating in the above listed competition. I make this release and waiver of claim with full knowledge of the hazards and inherent risks associated with the above listed competition. I hereby assume the risk of injury and property damage/loss.

**RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST.
IMPORTANT: READ THIS RELEASE CAREFULLY, BY SIGNING THIS FORM
YOU WILL BE GIVING UP IMPORTANT LEGAL RIGHTS.**

In consideration of the acceptance of my entry blank in this powerlifting competition, I intend to legally bound for not only myself, also my heirs, my executors, and my administrators. In signing this release from liability, I waive and release everyone connected with this competition from any and all liability which may arise from this competition. Moreover, I agree that any testing method which the meet director and the sponsors of the meet use to detect the presence of strength inducing drugs SHALL BE CONCLUSIVE. That is whether I think the results of the test are right or wrong, I agree that I have no right to challenge the results of the test. I further agree to submit to any physical tests, which may be necessary to complete the drug testing. Should I fail to pass the drug test, I agree to waive any claim, which might arise under state law for defamation, slander, or libel, or any other claim on which legal relief is available.

I agree to pay any attorney fees and litigation expenses incurred by any person, real or corporate whom I may sue in an effort to challenge this release from liability. I understand that my agreement to pay attorney fees and litigation expenses is the sine que uno for the acceptance of my entry in this contest.

Signature in Full of Competitor

Signature in full of parent or guardian if the applicant is under 18 years old

CERTIFICATION

I hereby give my word of honor as an athlete that I have not used any strength inducing drugs (i.e. any anabolic steroids or natural hormone) as part of my training during the past 36 months, or any prohibited stimulants or diuretics in the past 7 days prior to this contest.

Signature of contestant _____ Date _____

<p>ENTRY FEE IS NON-REFUNDABLE</p> <p>LEGAL PHOTO ID REQUIRED</p> <p>ALL ENTRIES MUST BE POSTMARKED NO LATER THAN MARCH 2ND, 2010</p>
--

