



## ***2009 VMI POWERLIFTING CLASSIC BENCH PRESS/DEADLIFT/IRONMAN***

### **WHERE**

Virginia Military Institute  
Cocke Hall – Main Floor  
Lexington, VA 24450

Food available at the meet site

**[Mapquest.com](http://Mapquest.com) for directions**

### **WHEN**

Saturday December 5, 2009

Equipment check & Weigh-in - 8-9:30 A.M.

Lifting begins at 10 A.M

No Early weigh ins

### **WHO**

Lifters and teams must be registered with the USAPL and must be drug free by the definition of the USAPL. USAPL registrations will be available at the meet. A minimum of 10% of lifters will submit to a urinalysis drug test.

**The first 60 lifters to enter will be accepted for the meet.**

### **AWARDS**

1st thru 5th in each class and age group in Open, Teenage, and Master, Male and Female

RAW and Equipment all weight class all age divisions

In full power, bench press, deadlift, Ironman

1st thru 3rd Team

### **WEBSITE**

**[www.virginiausapl.com](http://www.virginiausapl.com)**

**[www.vmipowerlifting.com](http://www.vmipowerlifting.com)**

### **WEIGHT CLASSES**

#### **Men**

123 132 148 165 181 198 220 242 275, UNL

#### **Women**

105 114 123 132 148 165 181 198 UNL

### **SPECTATOR ADMISSION**

\$5.00 12 and under free

### **ENTRY FEE**

\$65.00 per entry \$30 for each additional divisions  
(NO REFUNDS)

**ENTRIES MUST BE POSTMARKED BY November 27  
2009**

### **HOTEL**

To be determined at a later date.

### **RULES**

USAPL rules will apply. [www.usapowerlifting.com](http://www.usapowerlifting.com)

### **MEET DIRECTORS:**

**Monte Sparkman 540-464-7559**

[sparkmanmr@vmi.edu](mailto:sparkmanmr@vmi.edu)

**John Shifflett**

[valifting@aol.com](mailto:valifting@aol.com)



**Mail entry form and payment to:  
 Monte Sparkman  
 314 Cocke Hall  
 Virginia Military Institute, Lexington, VA 24450**

**ENTRIES MUST BE POSTMARKED BY November 27, 2009**

In consideration of your accepting this entry, I hereby for myself and my heirs, release any & all rights/claims for damages for injuries I may have against American Legion Post #128 USA Powerlifting, American Drug Free Powerlifting Association, John Shifflett, William Morris, all other meet directors & staff, and any & all other participating sponsors, supporters, referees, and spotter/loaders as a result of my traveling to, and/or from and/or participating in, the above listed competition. I make this release and waiver of claim with full knowledge of the hazards and inherent rights associated with the above listed competition. I hereby assume the risk of injury and property damage/loss. Also, in consideration of your accepting this entry I hereby sign over my rights to be video taped and/or photographed to the meet directors and/or his designee. I am fully aware that I will receive no royalties and/or compensation for resale/use of the videotapes and/or photographs.

**RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST**

**IMPORTANT: READ THIS RELEASE CAREFULLY. WHEN YOU SIGN IT YOU WILL BE GIVING UP IMPORTANT LEGAL RIGHTS.**

In consideration of the acceptance of my entry in this Powerlifting competition I intend to be legally bound, for not only myself but also for my heirs, my executors, and my administrators. In signing this release from liability I waive and release everyone connected with the competition from any and all liability, including any results of negligence which may arise from this competition.

Moreover I agree that any testing method which the meet director and the sponsors of this meet use to detect the presence of strength-inducing drugs SHALL BE CONCLUSIVE. That is, whether I think results of the tests are right or wrong I agree that I have no right to challenge the results of the drug tests. I further agree to submit to any physical tests which may be necessary to complete drug testing. Should I fail to pass drug tests, I agree to forfeit any trophy or award which I otherwise have won. I understand and agree that if I fail to pass the drug tests, my name will appear on a published list of suspended members. If it is determined that I have failed the drug test, I agree to waive any claim for which legal relief is available.

I agree to pay any attorney fee and litigation expenses incurred by any person, real or corporate, whom I may sue in an effort to challenge this Release from Liability form. I understand that my agreement to pay attorney fees and litigation expenses is the Sine Qua Non for the acceptance of my entry in this contest. If any provision of this release form liability shall be deemed by a court of competent jurisdiction to be invalid, the remainder of this Release of Liability shall remain in full force and effect. I also certify with my signature that this release/agreement cannot be modified orally.

**Certification:** I hereby give my word of honor as an athlete that I have not used any strength inducing drugs (i.e. any anabolic steroid, natural hormone or synthetic growth hormone) as part of my training during the past thirty six months, nor have I used prescription diuretics or psychomotor stimulants during the seven days prior to this meet.

\_\_\_\_\_  
Signature in full of applicant

\_\_\_\_\_  
Signature in full of parent or guardian

**Entry Form**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: M F Birthdate: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tele: \_\_\_\_\_ Email: \_\_\_\_\_

USAPL Card #: \_\_\_\_\_ Wt. Class: \_\_\_\_\_ Full Meet \_\_\_\_\_ BP Only \_\_\_\_\_ DL Only \_\_\_\_\_

Ironman BP & DL \_\_\_\_\_ RAW \_\_\_\_\_ Equipment \_\_\_\_\_

**Circle Divisions entering:**

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**Women OR MEN**

Open, Teen 14-15,16-17,18-19, 20-23, Master 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74,  
 Special Olympian, College, Police and Fire,