Twin City Barbell

presents



*"A December to Remember"*

Full Power, Push / Pull & Single Lift

**December 27th 2014**

**Nazareth Barbell Club – Home of Twin City Powerlifting Team – Nazareth, PA**

**Schedule:**  Friday December 26th 2014 (at Nazareth Barbell Club 181 S Whitfield St, Nazareth, PA 18064)

5:00 to 6:30 PM: Early weigh-in for all competitors.

Saturday December 27th 2014: (at Nazareth Barbell Club 181 S Whitfield St, Nazareth, PA 18064)

7 AM to 8:30 AM: regular weigh-in for all remaining competitors.

8:30 a.m.: Mandatory rules clinic.

9:15 a.m.: Competition begins

**Entry Fee:**  $55.00 – Full Power Push/Pull - $50.00 Single Lift - $45.00

Fees are not refundable, and must be post-marked by December 20th 2014 ($25.00 late fee)

Team entry $25.00 (Powerlifting Meet only) Must also be a registered 100 % Raw team

Roster and a copy of the team registration must be turned in at the Saturday weigh-in.

Must notify meet director Ron Lobb (484) 542-0432 one week in advance.

**Mail entries to:** Ron Lobb, 2120 Birch St., Easton, PA 18042

Phone: (484) 542-0432 ronaldlobb@gmail.com

**Eligibility:**  Contest is open to any athlete with a current 100 % Raw membership card.

Cards may be purchased at the contest.

All athletes must be drug-free for a minimum of 24 months.

**Awards:** Medals to top five places in all weight classes for all groups.

Best Lifter awards to be determined by turnout in each division.

Top three teams for Powerlifting Contest (only)

Push/Pull meet—only first place medals will be awarded

**Male**

**Weight Classes:** 114.5, 123.5, 132.25, 148.75, 165.25, 181.75, 198.25, 220.25, 242.5, 275.5, 308.2, SHW

**Female**

**Weight Classes:** 97, 105.75, 114.5, 123.5, 132.25, 148.75, 165.25, 181.75, 198.25, over 198.25

**Youth**

**Weight Classes:** **77, 88** Only eligible for state records & 97, 105 in addition to the above weight classes.

**Divisions**: Open, teenage (under 12, 12-13, 14-15, 16-17, 18-19), Junior (20-24), Sub-master (35-39),

Master (40-44, 45-49, 50-54, etc.)

One-piece lifting suit is required for all adults. No support gear. 4” belt is allowed with a buckle or Velcro. Knee high socks must be worn in the deadlift. Wrist wraps (24” max) may be worn. All lifters are subject to drug testing.

Failure will result in disqualification from the meet.

**(Page 2 & 3 must be filled out completely)**

***100% RAW***

**A December to Remember**

**December 27th 2014**

**ENTRY FORM**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | | | | Age | |  | | | Birthdate | | |  | | |
| Address |  | | | City | |  | | | | | State | |  | | Zip | |  |
| Phone | **(****)** |  | | | Weight Class | | | | |  | | | | Male | | Female | |
| 100% Raw Membership Card Number | | |  | | | | | Email | | |  | | | | | | |

**Please enter me in: (check whichever applies)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Powerlifting** | | | |  | **Single Lift (Check appropriate box)** | | | | | |
| Powerlifting Open $55 |  | Age Group $55 |  |  | Squat Open $45 |  |  | Age Group $45 | |  | |
| Push/Pull Open $50 |  | Age Group $50 |  |  | Bench Open $45 |  |  | Age Group $45 | |  | |
|  |  |  |  |  | Deadlift Open $45 |  |  | Age Group $45 |  | |

|  |  |
| --- | --- |
| Total Due: | $ |
| Make Checks Payable to: | Twin City Barbell Club |

**100% RAW BANNED SUBSTANCE LIST**

The intent of this list is to inform athletes of substances that are not allowed by the ADAU. Please note that this list is NOT all inclusive and that it is ultimately the athlete’s responsibility to know what he or she is taking. The athlete is also responsible for his or her testosterone:epi-testosterone (T: E) ratio. DO NOT use any substance before checking with your physician or the USOC Drug Reference Line at 1 800 233-0393. When in doubt, ask.

The following is a list of classes of banned drug with examples of substances under each class:

-Anabolic agents / anabolic steroids: Androstenediol androstenedione boldenone clostebol dehydrochloromethyltestosterone dehydroepiandrosterone (DHEA) dihydrotestosterone (DHT) dromostanolone epitrenbolone fluoxymesterone gestrinone mesterolone methyltestosterone nandrolone norandrostenediol norandrostenedione norethandrolone oxandrolone oxymetholome stanozolol testosterone tetrahydrogestrinone (THG) trenbolone methanedione methenolone clenbuterol and related compounds.

-Diuretics: acetozalimide benzhiazide chlorothiazide furosemide and related compounds

-Peptide hormones and analogues: Corticotrophin (ACTH) human chorionic gonadotrophin (HCG) luteinizing hormone (LH) growth hormone (HGH, somatotrophin) insulin-like growth factor (IGF-1)

-Stimulants: Amiphenazole amphetamine bemigride benzphetamine bromantan chlorphentermine cocaine diethylpropion dimethylamphetamine ephedrine (ma huang) ethylamphetamine fencamfamine meclofenoxalate methamphetamine methylenedioxymethamphetamine (MDMA, ecstasy) methylphenidate nikethamide pemoline pentetrazol phendimetrazine phenmetrazine phentermine phenylpropanolamine (ppa) picrotoxine pipradol prolintane strychnine synephrine (citrus aurantium, bitter orange, zhi shi) and related compounds.

-Manipulation of urine sample:

The use of substances and methods that alter the integrity and/or validity of urine samples provided during ADAU drug testing is banned. Examples include catheterization, urine substitution and/or tampering or modification of renal excretion by the use of diuretics, probenecid, bromantan or related compounds and epitestosterone administration.

I hereby give my word of honor as an athlete that I have not used any banned substances as listed above as part of my training during the past 24 months (2 years), nor have I used any prescription diuretics or any psychomotor stimulants during the seven days before the contest.

I have carefully read all of the above and I fully understand and agree with all of its contents. In acknowledgement hereof, I affix my signature.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of athlete Date

ATHLETES MUST COMPLETE AND SIGN THE RAW RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND THE PARENTAL CONSENT AGREEMENT (“AGREEMENT”)

**Release, Waiver of Liability, Assumption of Risk, Indemnity, and parental Consent Agreement (“agreement”)**

In consideration of being permitted to participate in a 100% RAW (“activity”) I, my personal representatives, and assigned heirs and next to kin:

1. **ACKNOWLEDGES,** agree, and represent that I understand the nature of the activity and that I am qualified, in good health and in proper physical condition to participate in such activity. I further agree and warrant that if at any time I believe conditions to be unsafe; I will immediately discontinue further participation in the activity.

2. **FULLY UNDERSTAND** that: (a) **ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH (“Risks”):** (b) these Risks and dangers may be caused by my own actions or in actions of others participating in the activity, the condition in which the activity takes place, or **THE NEGLIGENCE OF THE “RELEASEES” NAMED BELOW:** there may be **OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES** either not known to me or not readily foreseeable at this time: and **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALLRESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** I incur as a result of my participation or that of the minor in the activity.

3. **HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE** the 100% RAW Powerlifting Federation, Paul Bossi, Ron Lobb, or any related affiliated and subsidiary companies of each, as well as the officers, directors, agents, employees and assigns of each, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, and any other party indemnified and held harmless by the 100% RAW, (each considered one of the **“RELEASEES”** herein) **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, ANDRECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE** that if, despite this **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITYAGREEMENT I,** or anyone on my behalf, makes a claim against any of the Release’s, **I WILLINDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES** from any litigation expense, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

**4. Drug Testing Statement, Agreement, & Release of Liability**

I give my word as an athlete that I have not utilized any type of strength-including chemicals (anabolic steroids, growth hormone, etc.) for the past two years.

**In consideration of the acceptance of this entry, I agree to any test method deemed necessary by the meet director(s) and that the results of said testing method which the meet director and/or sponsors of this meet use to detect the presence of the strength inducing drugs may be released to any third party(ies) and I generally and specifically waive any right to privacy if any, related there to. I also understand that 100% RAW Powerlifting Federation, Inc. reserves the right to publish drug-testing results (passes and failures).**

I hereby waive and release, intending to be legally bound for myself, my executors, administrators, and heirs, all rights and claims for damages I may have against **Nazareth Barbell**, and all parties associated with this “**A December to Remember**” event as a result of testing positive for the utilization of strength-inducing chemicals. Should I fail the drug test, I agree to forfeit my award that I may have won. I agree that if I fail the drug test my name will appear on a published list of suspended members. If the drug test to which I submit is positive, then I waive any claim, action or cause for which legal relief is available.

**My entry into the “A December to Remember” event constitutes my consent to the testing procedures; and, if any such results test positive, I understand that I shall be disqualified from the pertinent competition and suspended for a period to be fixed by the meet director(s).**

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Printed name of participant: |  | | Phone: |  |
| Participant’s signature (only if age 18 or over): | |  | Date: |  |

**Minor’s RELEASE**

AND I, THE MINOR’S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR’S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE’S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR’S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE. I THE MINOR OR ANYONE ON THE MINOR’S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAME ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Printed name of Parent or Guardian | |  | | | |  | Phone: | |  | | | |
| Address |  | | City | |  | | | State |  | | Zip |  |
| Parent/guardian signature (only if participant is under the age of 18): | | | |  | | | | | |  | Date: |  |