

### 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 26<sup>th</sup> 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 27<sup>th</sup> 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. <u>No</u> 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.

#### 100% RAW

## A December to Remember December 27<sup>th</sup> 2014

#### **ENTRY FORM**

Name						Age		Bir	thda	ite					
Address					City			State			Zip				
Phone	( )				Wε	eight (	Class		I	Male		Fem	ale		1
100% Raw M	Iembership	Card	l Numbe	er			Email								_
							_								
Please enter me in: (check whichever applies)															
	Powe	erlifti	ing				Sing	gle Lift (C	Chec	k ap	prop	riate b	ox)		
Powerlifting C	•			oup \$55			quat Ope					Group			<u></u>
Push/Pull Ope	n \$50		Age Gr	oup \$50			ench Op					Group		<u> </u>	<u>_</u>
						Г	eadlift C	Open \$45			Age	Group	<u>\$45</u>		<u>」</u>
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 1800 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) dromostandone epitrenbolone Ilouxymesterone essertione mesterolone methyltestosterone nandrolone norandrostenedion norandrostenedion norandrostenedion methenolone clenbuterol and related compounds.  -Diuretics: acetozalimide benzhiazide chlorothiazide furosemide and related compounds.  -Politics: Amiphenazole amphetamine benigride benzphetamine bromantan chlorphentermine cocaine diethylpropion dimethylamphetamine ephedrine (ma huang) ethylamphetamine fencamfamine meclofenoxalate methamphetamine methylenedioxymethamphetamine (MDMA, ecstasy) methylphenidate nikethamide pemoline epitetrazol 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 u									so our ool ne iol G) ne ne ne ne ne ne						
Signature of ath	nete				Page		alt								

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 INDEMNITY AGREEMENT 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 <u>Nazareth Barbell</u>, and all parties associated with this "<u>A December to Remember</u>" 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 NATUR	RE OF ATHLETIC ACT	IVITIES AND THE
MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE	THE MINOR TO BE QUALIFI	ED, IN GOOD HEALTI	H, AND IN PROPER
PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVI	TY. I HEREBY RELEASE, DIS	SCHARGE, COVENAN	IT NOT TO SUE, AND
AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS			, ,
LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAU			
NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, IN(			
THAT IF, DESPITE THIS RELEASE. I THE MINOR OR ANYO			
RELEASEES NAME ABOVE, I WILL INDEMNIFY, SAVE, AN			
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	e of		<u> </u>
18):			Date: