



## **Membership Form**

New member (please tick)	Yes	□ No □	
Surname	Give	en name(s)	
Male $\square$ Female $\square$ (please tick o	ne) Date	e of birth	
Mailing Address			
Street	Subu	rb	P/Code
Telephone (Home) Email	(Wor		(Mob.)
Training venue	IValli	e of coach	
Membership Type	Cost		Please tick one
Associate Non-Lifter	\$25.00		
Youth (under 19yo)	\$35.00		
Junior (20-23yo)	\$50.00		
Senior (24-39yo)	\$75.00		
Master (40-59yo)	\$75.00		
Senior Master (60yo and older)	\$50.00		
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Payment can be made via:	Cheque	To be made payable to VD	PFPA inc.
	Direct Deposit	VICTORIAN DRUG FREE PO BSB 083-536 Account Number 04-948-	OWERLIFTING ASSOCIATION 8684
Please send cheques/completed application forms to:		VDFPA Inc 21 Duncan Avenue Greensborough, 3088 Email:vdfpacomps@gmail.com	

Are you a member of any other Powerlifting or any other sporting association?  If so, which association?	Tick Yes or No Yes □ No □
Have you been tested for drugs in the last five years?	Yes $\square$ No $\square$
Have you fully read, understand, and agree to VDFPA Inc. and 100% Raw Powerlifting Federation drug testing?	Yes $\square$ No $\square$
Have you fully read, understand, and agree to the Release from Liability Statement?	Yes $\square$ No $\square$
Do you give your word of honour that you have not used any banned drugs or substances in the last 5 years or prescribed diuretics or psychomotor stimulants in the 7 days prior to competition?	Yes □ No □
I hereby <b>agree / disagree</b> (circle one) with the publication of my photograph via v (newspaper, television, internet).	arious media
I hereby agree to abide by the constitution & rules of the VDFPA Inc and 100% Ray Federation if accepted as a member.	w Powerlifting
Applicant's signature Date:	
Parent/Guardian's Date:	

<u>VDFPA INC CONSTITUTION STATES:</u> Any lifter who intentionally competes in any sporting event sanctioned by any person or body which does not adhere to the drug free concept or does not adopt all schedules of the International Olympic Committee Banned substance list or is not recognized by this Association, shall be liable to suspension of Membership to this Association and all rights and benefits which accrue to such Membership

I also agree to the information provided to be used by the Victorian Drug Free Powerlifting Association Inc and 100% Raw Powerlifting Federation for the purpose of maintaining my membership and is not disclosed to any other persons or party. I may gain access to my information by contacting the Secretary.

## **RELEASE FROM LIABILITY and CONSENT TO DRUG TEST:**

NOTE: Please read this release very carefully as when you sign it, you will be giving up important legal rights.

In consideration of the acceptance of my membership AND entry form/s to VDFPA Inc and 100% Raw Powerlifting Federation competitions, I intend to be legally bound for not only myself, but also my heirs, executors and my administrators. Additionally, I understand that Powerlifting is an inherently hazardous activity and that participation in this sport exposes me to the risk of injury or death. I further understand that NEITHER the VDFPA Inc, NOR the 100% Raw Powerlifting Federation will reimburse me for, or coverage of any medical expenses incurred by me as a result of injuries that I might sustain, training for, traveling to or from, or participating in the

competition. In signing this release from liability, I waive and release anyone connected with any competition; i.e. the meet directors, Victorian Drug Free Powerlifting Association Inc, the championships sponsors and staff, the 100% Raw Powerlifting Federation, the contest facilities or any persons associated 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 selected by VDFPA Inc & 100% Raw Powerlifting Federation recognized testing officers may be applied to detect the presence of drugs, as listed on the World Anti-Doping Agency (WADA) banned substances list which SHALL BE CONCLUSIVE.

I agree to co-operate fully with all required IOC & WADA sampling and testing procedures. This includes any testing procedures that may be considered necessary prior to or after this event. Should I fail to pass the drug testing procedures, I agree to forfeit any trophy, award, record or placing which I won during the championships and I also forfeit any previous trophy, award, record or placing should the offence be deemed serious enough, according to VDFPA Inc and 100% Raw Powerlifting Federation rules, to warrant such an action. I understand and agree that if I fail to pass the drug testing process, my name will appear on a published list of suspended members. If determined that I failed the drug test, I agree to waive any claim for which legal relief is available. I also agree to waive any claim that might arise under state, national or international law for defamation, slander, libel, or any other claim for which legal relief is available. I understand that my agreement to pay attorney fees and litigation expenses is the SINE QUA NON for acceptance of my entry in this championship. If any provision of this Release From Liability shall be deemed by a court of competent jurisdiction to be invalid, the remainder of this Release from Liability shall remain in full force and effect. I also certify with my signature that this release/agreement cannot be modified orally.

Note: Drugs include not only anabolic steroids, HGH, and other sport enhancing drugs, but also cannabis, amphetamines, cocaine, heroin, ecstasy, etc.

I,	have read, fully und policy:	have read, fully understand, and accept this policy:		
Applicant's signature		Date:		
Parent/Guardian's signature (if U18)		Date:		

In consideration of the entry, I hereby intend to be legally bound by myself, my heirs, executors or administrators, waive any and all rights and claims for damages against Victorian Drug Free Powerlifting Association Incorporated, 100% Raw Powerlifting Federation, the management, committee members, organisers and or assigns, and the sponsors of this contest, for any injuries suffered by me at any Powerlifting competition organised by VDFPA Inc & 100% Raw Powerlifting Federation.

Applicant's signature	Date:	
Parent/Guardian's signature (if U18)	Date:	