



18th Annual “Battle of the Border”



100% RAW Powerlifting Federation Sanctioned III Event

Push/Pull, Bench Press, Deadlift, Strict Curl

Host City: Currituck, NC

Meet Director: Paul Bossi, 139 Marla’s Way, Camden, NC 27921 252-339-5025

Date: Saturday, February 25, 2017

Venue: Currituck High School

Time: Doors open – 8am, Lifting starts at 9am

Weigh-in: Friday February 24th, 5-7pm **Fitness Warehouse in Elizabeth City**
Saturday February 25th; 7-8am Currituck High School

Technical Meeting: Saturday, February 25th, 8:15

Scales: Professional calibrated digital scale

Identification: Photo Identification is necessary for security, to verify every lifter’s entry information, and to help validate drug testing. Acceptable identification includes driver’s license, state ID, school ID, passport. Work ID badges and recreational/social club ID’s are not acceptable.

Federation Membership Fee: Current federation membership is required. New applicants should submit a completed membership form along with the event entry form prior to the event. All lifters must produce photo identification and 100% Raw Powerlifting Federation membership cards prior to weigh-ins. If lifters are picking up their membership cards at the event, they should do so before weighing in.

Entry Fee: All fees should be paid by Saturday February 25, 2017

\$25 Medal Class (Teenage only), \$60 per individual lifter for Bench Press or Deadlift, \$50 for Strict Curl
\$70 for the Push/Pull Division, \$35per Crossover.

Awards: Will be supplied by Elizabeth City Trophy, **Swords, Mounted Daggers, Mounted Axes & Mounted Maces**

Best lifter awards will also be giving. 4 Foot Sword for Overall Bench & Ironman Best Lifter.

Correspondence (email preferred): Questions regarding 100% Raw Powerlifting Federation events should be sent to rawlifting@aol.com

Attire	4 th Lift	Order of Events Saturday		Music
Singlet is mandatory. Athletic or cloth-soled shoes only	State, National, World Record attempts only.	1. Strict Curl	2. Bench Press	Yes
		3. Deadlift, Curl	4. Awards	

Paul Bossi
President
100% RAW Powerlifting Federation

Nebula Bench
Ivanko Chrome Calibrated Weights
Texas Deadlift Bar



Powerlifting Federation
www.rawpowerlifting.com

18TH Annual

Official use only:

Bench: _____

Deadlift: _____

Strict Curl: _____

Body Weight: _____

Battle of the Border

Bench Press, Deadlift & Push/Pull, Strict Curl

Saturday February 25, 2017

4203 Caratoke Hwy

Barco, NC 27917

Meet Director: Paul Bossi (252) 339-5025 / rawlifting@aol.com

PLEASE PRINT:

NAME: _____ DATE OF BIRTH: ___/___/___ AGE: ___ SEX: M F

ADDRESS: _____ CITY: _____ STATE: ___ ZIP: _____

DAY PHONE: _____ NIGHT PHONE: _____ EMAIL: _____

BODY WEIGHT: _____lb RAW CARD NUMBER: _____ EXPIRATION: _____

WEIGHT CLASSES: Please circle which you will compete in:

Women: 66 – 77 – 88 – 97 – 105 – 114 – 123 – 132 – 148 – 165 – 181 – 198 – 198+

Men: 66 – 77 – 88 – 97 – 105 – 114 – 123 – 132 – 148 – 165 – 181 – 198 – 220 – 242- 275 – 308 - SHW

DIVISIONS (CHECK AS MANY AS YOU WANT TO ENTER): Each Division has all weight classes.									
YOUTH 11 & UNDER:	TEEN: 12-13	14-15	16-17	18-19	JUNIOR: 20-24 <input type="checkbox"/>				
MASTERS	40-44 <input type="checkbox"/>	45-49 <input type="checkbox"/>	50-54 <input type="checkbox"/>	55-59 <input type="checkbox"/>	60-64 <input type="checkbox"/>	65-69 <input type="checkbox"/>	70-74 <input type="checkbox"/>	75-79 <input type="checkbox"/>	80-84 <input type="checkbox"/>
OPEN: (ALL AGES) <input type="checkbox"/>			LAW / FIRE / MILITARY: <input type="checkbox"/>			SUB MASTERS: 35-39 <input type="checkbox"/>			
<input type="checkbox"/> (25-29) <input type="checkbox"/> (30-34) This age groups are for cross over only & state records only.									
T-Shirts	S <input type="checkbox"/> x _____	M <input type="checkbox"/> x _____	L <input type="checkbox"/> x _____	XL <input type="checkbox"/> x _____	2XL <input type="checkbox"/> x _____	3XL <input type="checkbox"/> x _____			
Event t-shirts are only \$15 each when ordered along with event registration. You can order as many as you like.									
ALL ENTRIES ARE DUE BY February 18, 2017. ** Entries after Feb 18 will incur a \$20 late fee. Cash only! No refunds									
<input type="checkbox"/> Bench Press				\$60	Weigh-Ins: February 24th Friday 5-7pm Fitness Warehouse Elizabeth City Saturday, February 25th, 7:00-8:00 am Currituck High School Rules Meeting: Technical Meeting, 8:15 am				
<input type="checkbox"/> Deadlift				\$60					
<input type="checkbox"/> Strict Curl				\$50					
<input type="checkbox"/> Push/Pull (Bench & Deadlift combo)				\$70					
<input type="checkbox"/> Team				\$75					
<input type="checkbox"/> Medal Class Teens only				\$25					
CROSSOVERS: # OF CROSSOVERS _____				X \$35 =	Lifting Starts: 9:00am Awards Presentation will follow event				
T-Shirt(s) _____ x				X \$15 =					
TOTAL AMOUNT ENCLOSED:				\$ _____					

Rules: 100% RAW rules can be found online or by requesting from our main office. Drug testing will be conducted so be sure to take responsibility for what you put into your body. For help/info contact the USOC hotline at 1-800-233-0393 or www.wada.com.

MAKE CHECK OR MONEY ORDER
 PAYABLE TO MEET PROMOTER:
Paul Bossi
139 Marla's Way
Camden, NC 27921

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 ALL RESPONSIBILITY 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, Currituck County Public Schools and 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 Powerlifting Federation, Inc., (each considered one of the **"RELEASEES"** herein) **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, 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, AND RECREATIONAL 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 WILL INDEMNIFY, 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 three years (**February 25, 2014 – February 25, 2017**)

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 thereto. I agree to have my name published on the 100% RAW Powerlifting website with the results of my drug test.

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 **Paul Bossi, Currituck County School system**, and all parties associated with the **2017 100% RAW Powerlifting Federation, Inc. "Battle of the Border"** as a result of testing positive for the utilization of strength-inducing chemicals.

My entry into the 2017 100% RAW Powerlifting Federation, Inc. Battle of the Border constitutes my consent to the testing procedures; and, if any such results test positive, I understand that I shall be disqualified form the pertinent competition and suspended for a period to be fixed by the board of 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. I UNDERSTAND THERE ARE NO REFUNDS IF I CANNOT MAKE THIS COMPETITION FOR ANY REASON.

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 GIVE PERMISSION FOR MY CHILD TO BE DRUG TESTED AND 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: _____

Parent/guardian signature (only if participant is under the age of 18): _____ Date: _____