



Sanction II Event

2017 Powerhouse Gym Iron Bash

Full Powerlifting/ Bench / Deadlift / Strict Curl

Meet Director: Phil Bloyd, 12001 Shelbyville Rd ste 104 Louisville, Ky 40243 (502) 396-1623

Venue: Powerhouse Gym Louisville, Ky. 40243

Date: Strict curls Friday Feb 24 and full meet will be held on Saturday Feb 25, 2017

Lifting: Strict Curls will be held on Friday Feb 24. Squat, Bench Press, and deadlift will be held on Sat Feb 25.

Time: Friday Curls 6pm Saturday Doors open – 8am, Lifting starts at 10am

Weigh-in: Early weigh in Friday: Feb 24th (4-6pm) or weigh in Sat Feb 25th 8am to 9am @ Powerhouse Gym
Technical Meeting: 9am Lifting Starts at 10am

Scales: Professional digital scale

Arrivals/Transportation: Ample parking is available in the lot. For best directions, www.google.com.

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.

Entry Fee: All fees should be paid by the **Deadline Date: Feb 15th, 2017**

Awards: **Custom Made Trophies and Medals depending on placing**

Attire	4 th Lift	Order of Events		Music
Singlet is mandatory.	State & National Record Attempts	1. Weigh-Ins	2. Rules	Yes
		3. Competition	4. Awards	

**THIS IS A DRUG FREE EVENT
AND DRUG TESTING WILL TAKE
PLACE.**

Ivanko Certified Plates

**State Records
National Records**



www.rawpowerlifting.com



2017 Powerhouse Gym Iron Bash

Saturday Feb 25th, 2017
 Powerhouse Gym
 12001 Shelbyville Rd. Louisville, Ky. 40243

Meet Director: Phil Bloyd 502-396-1623 pt475@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: _____

CIRCLE WEIGHT CLASS:															
WOME	97	105	114	123	132	148	165	181	198	198+					
MEN		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:	<input type="checkbox"/>	TEEN: 12-13	<input type="checkbox"/>	14-15	<input type="checkbox"/>	16-17	<input type="checkbox"/>	18-19	<input type="checkbox"/>	JUNIOR: 20-24	<input type="checkbox"/>				
MASTERS:	40-44	45-49	<input type="checkbox"/>	50-54	55-59	<input type="checkbox"/>	60-64	<input type="checkbox"/>	65-69	<input type="checkbox"/>	70-74	75-79	<input type="checkbox"/>	80-84	<input type="checkbox"/>
<input type="checkbox"/> OPEN: (25-24) & ALL AGES				<input type="checkbox"/> POLICE / FIRE / MILITARY:				<input type="checkbox"/> SUB MASTERS: 35-39							

T-SHIRT:	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 registration. You can order as many as you like.

<input type="checkbox"/> Full Powerlifting	\$75 _____
<input type="checkbox"/> Bench Press Only	\$60 _____
<input type="checkbox"/> Deadlift Only	\$60 _____
<input type="checkbox"/> Strict Curl	\$60 _____
<input type="checkbox"/> Push/Pull	\$65 _____

<input type="checkbox"/> Team Fee (ROSTER OF 10)	\$75 _____
--	------------

CROSSOVERS: # OF CROSSOVERS _____ X	\$30 _____
-------------------------------------	------------

T-Shirt(s) _____ X \$15 each	= \$ _____
------------------------------	------------

TOTAL AMOUNT ENCLOSED:	_____
-------------------------------	-------

ALL ENTRIES ARE DUE BY
 Feb 15, 2017

Send Payment to:

Powerhouse Gym
 12001 Shelbyville Rd. ste 104
 Louisville, Ky. 40243

Sanction II Event
National Records
State Records

Weigh-Ins:

Powerhouse Gym
 Friday Feb 24th (4-6)PM
 Sat Feb 25th (8-9)AM

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

Rules Meeting:

Technical Meeting:
 Saturday Feb 25th 9am
 Lifting Starts at 10am

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, Inc., Paul Bossi, Powerhouse Gym, Phil Bloyd** 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 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 (**Feb 24th, 2014 to Feb 24th, 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 there to.

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 **100% RAW Powerlifting Federation, Inc., Paul Bossi, Phil Bloyd, Bloyd Fitness LLC dba Powerhouse Gym**, and all parties associated with the **2017 Powerhouse Gym Iron Bash**, as a result for testing positive for banned substances and the utilization of strength-inducing chemicals. I give permission to post my name and make it public if I test positive.

My entry into the 2017 Powerhouse Gym Iron Bash 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 from the federation for a 2 year term.

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, notwithstanding, 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 release'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 "releases" 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 releases name above, i will indemnify, save, and hold harmless each of the releases 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: _____
Street City State Zip Code

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