



Southwest Regional Meet 2017

**Full Power / Iron Man / Push-Pull / Bench Only / Curl / Dead
THIS WILL BE A LIMITED ENTRY EVENT**

Meet will be capped at 30 per day (60 lifters total)

Meet Directors: Paul Gillott, (928) 899-4223 psgillott@cableone.net and Mike Early (602) 769-0778

Venue: Desert Rose Steak House & Pizza; 6729 N. 57 Dr, Glendale, AZ 85301
(In the pavilion behind the restaurant)

Weigh-in location: Relentless Power Gym; 5816 W. San Miguel Ave, Glendale, AZ 85301

Date: Saturday April 22nd & Sunday April 23rd, 2017

Lifting: **All Women and Men 165 class and below** will lift on Saturday. All Men 181 class and above will lift on Sunday. Please contact me if you need special arrangements.

Time: Saturday & Sunday doors will open at 8am, Lifting starts at 10:00 AM

Weigh-in: Friday night 5:00 – 6:00 PM or Saturday AM 8:00 – 9:00 AM for **Saturday Lifters** @ Relentless gym or Saturday night 5:00 – 6:00 PM or Sunday 8:00 -9:00 AM for Sunday lifters @ Relentless gym

Technical Meeting: 9:00 AM on Saturday & Sunday; **Lifting Starts at 9:30 AM on both days.**

Scales: Professional digital scale

Identification: Photo Identification is necessary. 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. Cards are encouraged to be purchased online and will be sold at the door.

Special Olympians, 19 & under \$15 and Adults \$30

Entry Fee: Unless prior arrangements are made, all fees should be paid by the **Deadline Date: April 8th, 2017**
Entries received after the deadline will be subject to a \$20 late fee

Make all checks Payable to: Sara Gillott

Awards: First thru Fourth place & Best Lifters. Given day of competition

Attire	4 th Lift	Order of Events		Music
Singlet is mandatory. Knee socks required for dead lift	State, National & World Record Attempts Only.	1. Weigh-Ins	2. Rules	
		3. Competition	4. Awards	

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

Ivanko Certified Plates
Texas Deadlift & power Bar
Forza style Bench

**State, National, & World
Records**

Mike Early's
Relentless
Power Gym
Glendale, AZ



Ivanko Calibrated Weights
Texas Deadlift Bar
Texas Power Bar
Forza Style Bench
Aluminum Curl Platform

Southwest Regional Meet 2017

Saturday & Sunday April 22nd & 23rd, 2017

Desert Rose Steak House & Pizza (in the pavilion out back)

6729 N. 57th Dr , Glendale, AZ 85301

Meet Directors: Paul Gillott (928) 899-4223 / psgillott@cableone.net & Mike Early (602) 769-0778

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:																	
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.

11 & UNDER: 12-13 14-15 16-17 18-19 JUNIOR: 20-24 25-29
 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-74
 75-79 80 + SPECIAL Athlete OPEN (ALL AGES) LAW / FIRE / MILITARY:

LATE entries WILL be accepted ONLY If CAP is not reached
\$20 late fee will apply
MAKE ALL CHECKS PAYABLE TO : SARA GILLOTT
Absolutely No entries will be accepted the day of competition

<input type="checkbox"/> Full Power (Squat, Bench, & Dead lift)	\$70 adult / student \$60
<input type="checkbox"/> Iron Man (Curl, bench, & Dead lift)	\$70 adult / student \$60
<input type="checkbox"/> Push/ Pull (Bench & Dead lift)	\$65 adult / student \$55
<input type="checkbox"/> Bench only	\$60 adult / student \$50
<input type="checkbox"/> Curl only	\$60 adult / student \$50
<input type="checkbox"/> Dead Lift only	\$60 adult / student \$50
<input type="checkbox"/> Full Power & curl only	\$120 adult / student \$100
<input type="checkbox"/> Cross over (open, age group, PFM)	\$20 per cross over
TOTAL AMOUNT ENCLOSED:	\$ _____

ALL ENTRIES ARE DUE BY
April 8th 2017

Send Payment to:
Sara Gillott
930 Sunlit Dr
Prescott, AZ 86301

Weigh-Ins:
 Relentless Power Gym
 Fri & Sat (5:00 – 6:00 pm)
 Sat & Sun (8:00-9:00)AM
 Call for Special Arrangements.

Rules Meeting:
 Technical Meeting:
 Saturday & Sunday @ 9:00 am
 Doors open @ 8:00
 Lifting Starts at 9:30am

Sanctioned Event
World Records
National Records
State Records

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, Paul or Sara Gillott, Mike Early, Relentless Power Gym** or 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 Releasee'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 five years (April, 22 2012 to April, 22 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, Paul Gillott, Mike Early, Relentless Power Gym** and all parties associated with the **2017 100% RAW Southwestern Regional Meet** 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 100% RAW Southwestern Regional meet 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 3 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, 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: _____
Street City State Zip Code

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