

<u>Judgement Day</u>

Date: Saturday, December 14, 2019 **Location:** The Forge Strength Gym, 13720 E US HWY 40, Independence, MO **Time:** 10:00am **Rules Briefing:** 9:30am **Weigh Ins:** Friday 5pm-6pm & Saturday 8am-9:30am **MEET STARTS AT 10AM!**

BE PREPARED!

Uniform: Singlet is required. Deadlift socks required for deadlift. No loose or baggy clothes. **If you are out of uniform, you will not lift.**

All bench shirts are required in the equipped division. RAW means no bench shirt or suits.

Meet Director: Rich McDowell Sanction: Warriors Powerlifting

Federation - WPLF

Entry Fee: Single Event, Push/Pull, Full Power - \$75 Combine Bench Press Challenge - \$30 **Spectator Fee:** Adults \$5.00, 12 and under FREE.

Eligibility: Open to any athlete 13 years or older. Entry Forms must be mailed by November 30.

SEND ENTRY FORM & MAKE CHECKS OR MONEY ORDERS PAYABLE TO:

RICH MCDOWELL 123 MOCKINGBIRD RD LAKE OZARK, MO 65049

PREFERRED CONTACT: WARRIORSPOWERLIFTINGFEDERATION@GMAIL.COM PHONE: 573-692-0096

CHECKS MUST CLEAR BEFORE EVENT!

(DETACH HERE)

CIRCLE ALL YOUR EVENTS AND DIVISIONS

RAW	GEA	R	SQUA	AT BE	NCH	DE	ADLIFT	FULL I	POWER	СО	MBINE (CHALLENGE
		TEEN		JR 20-23	OI	PEN	SUB MA	ASTER 3	5-39	MASTI	ER	
Weight class												
97	105	123	132	148	165	181	198	220	242	275	308	SHW

ENTRIES AFTER NOVEMBER 30 MUST BE PAID AT THE MEET WITH CASH ONLY. NO EXCEPTIONS!

I know that participation in a powerlifting competition is potentially dangerous. I should not enter unless I am able and properly trained. I understand and agree that Rich McDowell, Christina McDowell, Danielle Clark or the WPLF, The Forge Strength Gym, nor its employees or officers may be held liable for any occurrence in connection with this competition, which could result in injury, death, or damages to me. In consideration of being allowed to compete in this event, I hereby assume all risks in connection with this event and release Rich McDowell, Christina McDowell, Danielle Clark, the WPLF, The Forge Strength Gym, its weightlifting club operators, spotters and all other employees or officers or persons in any way connected to this event or the WPLF, for any injury or damage which may happen to me while I am engaged in this event, including all risk connected therewith, whether foreseen or unforeseen, and I do further agree to save and hold harmless the WPLF and all the above mentioned from any claim by, or by my heirs, executors, administrators, personal representatives and assigns arising out of my participation in this event. By signing, I understand and agree with all that is written above.

NAME:		DATE OF BIRTH:	AGE:						
SEX:	MAILING ADDRESS:								
CITY:	STATE:	ZIP CODE:							
PHONE:	EMAIL:								
	(ALL ENTRIES MUST BE COMPLETED TO ENTER)								
SIGNATURE:		(LIFTER, PARENT	OR GUARDIAN IF UNDER	18)					