

“The Pit” Barbell Club presents the
2019 Indiana State and OPEN POWERLIFTING & SINGLE EVENT Championships
Sanctioned by the
AMERICAN DRUG-FREE POWERLIFTING FEDERATION

DATE: SATURDAY, December 14, 2019.

VENUE & LOCATION: The Pit Barbell Club, 5221 Oak Grove Rd, Evansville, IN (directly across from Applebee's on Morgan Ave).

MEET DIRECTOR: MIKE STAGG
2920 Harmony Way (812) 431-9113 Cell
Evansville, In 47720 stagg@twc.com

ELIGIBILITY: All entries must be 2019 registered A.D.F.P.F. Members. Membership may be completed online. Website: <http://adfpf.net/membership/>. Lifters are encouraged to register their membership online prior to the meet. Lifters are encouraged to register early. Any memberships paid or renewed at this meet will be good through the end of 2020.

ENTRY FEE: POWERLIFTING or Single Event = \$50.00. Each additional single event = \$15.00. Powerlifting is all three events with winner determined on total. Single Event categories are awarded based on the individual single event.

(Fees are not refundable.) Make checks payable to MIKE STAGG.

ENTRY DEADLINE: Entries **with fees** must be **postmarked by SATURDAY, December 7, 2019**. Late entries will be accepted at the meet directors discretion but will incur a \$20 late fee in all instances.

MEET T-SHIRT: \$20 in advance (must be pre-ordered).

DIVISIONS OF COMPETITION:

UNEQUIPPED Division: Lifters must wear a NON-SUPPORTIVE singlet, NON-SUPPORTIVE T-shirt and shoes must be worn in each event (Lycra & Spandex. **SUPPORTIVE equipment LIMITED to the BELT and WRIST WRAPS.** The following are **NOT ALLOWED:** KNEE WRAPS, BOXER SHORTS, KNEE or ELBOW SLEEVES, LYCRA or SPANDEX SHIRTS.

EQUIPPED Division: Supportive equipment limited to the following in each Event:

SQUAT EVENT. SINGLE PLY SQUAT SUIT, cotton T-shirt, KNEE & WRIST WRAPS, SHOES or BOOTS.

BENCH PRESS EVENT: Supportive equipment includes a SINGLE PLY BENCH SHIRT with CLOSED seams and NO fasteners (the shirt must cover the entire torso including shoulders, chest & back; it may NOT be made of CANVAS), BELT, WRIST WRAPS. A non-supportive singlet must be worn over the shirt. If no supportive shirt is worn, a cotton T-shirt must be worn. LYCRA & SPANDEX are NOT ALLOWED. SHOES or BOOTS are REQUIRED.

DEADLIFT EVENT: Supportive equipment includes SINGLE PLY SUIT, BELT, KNEE & WRIST WRAPS are optional. SUPPORTIVE BRIEFS are **NOT** allowed. KNEE SOCKS, Shoes/slippers must be worn.

INDIVIDUAL AWARDS:

PLEASE NOTE THAT THE MASTERS DIVISIONS ARE COMBINED AS ARE THE TEEN DIVISIONS. Records can still be set in the respective age ranges.

ALL LIFTERS ARE AUTOMATICALLY ENTERED INTO the OPEN CATEGORY.

TOP THREE places in each WEIGHT CLASS of the **OPEN MEN's POWERLIFTING Championships.**
TOP THREE places in each WEIGHT CLASS of the **OPEN WOMEN's POWERLIFTING Championships**
TOP THREE places in each WEIGHT CLASS of the **COMBINED MEN's MASTERS' CATEGORY.**
TOP THREE places in the **COMBINED TEENAGE CATEGORY.**

Overall Best Lifter award(s) using McCullough and Foster formulas (where applicable)

TEAM AWARDS (NO CHARGE FOR TEAM ENTRIES): All teams MUST have a MINIMUM of 5 team members. Top 3 TEAMS in the **POWERLIFTING Championships (TEAMS may be men only; women only or Co-ed).**

WEIGHT CLASSES:

MEN:	52.0	56.0	60.0	67.5	75.0	82.5	90.0	100.0	110.0
	(114.5)	(123.5)	(132.25)	(148.75)	(165.25)	(181.75)	(198.25)	(220.25)	(242.5)
	125.0	145.0	+145.0						
	(275.5)	(319.5)	(+319.5)						

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WOMEN:	44.0	47.5	50.5	53.0	55.5	58.5	63.0	70.0	80.0	90.0	+90.0
	(97.0)	(104.75)	(111.25)	(116.75)	(122.25)	(129.0)	(139.0)	(154.25)	(176.25)	(198.25)	(+198.25)

CATEGORIES OF COMPETITION: The ADFPF offers 7 CATEGORIES of competition including: **OPEN** (from 14 upward); **TEEN 1** (14-15 yrs of age); **TEEN 2** (16-17 yrs of age); **TEEN 3** (18-19 yrs); **JUNIOR** (20-23 yrs of age); **MASTERS'** (starting at ages: 40-44; 45-49); 50-54; and so on in 5 year increments); **POLICE/FIRE/MILITARY** (must be employed FULL TIME). **ADFPF American & State RECORDS** may be set/broken in each of the above Categories, Divisions & Weight Classes for both male & female **LIFTERS in this competition.**

DRUG TESTING: URINALYSIS testing on a minimum of 10% of participants.

BANNED SUBSTANCE LIST: ADFPF drug control policies follow the World Anti-Doping Agency (WADA) guidelines, which will be applied in cases for substances not covered below. Banned substances include ANABOLIC STEROIDS, GROWTH HORMONES, PRESCRIPTION DIURETICS and PSYCHOMOTOR STIMULANTS. Many over-the-counter substances violate ADFPF Drug Control rules. Check all ingredients; if you have questions concerning medications and/or supplements, phone the DRUG HOTLINE at 1-800-233-0393.

ADFPF Active members are subject to both NIL-notice IN and OUT-OF COMPETITION drug testing and to Target Testing. If tested POSITIVE, the lifter may appeal by allowing the testing of Sample B at their expense. Lifters testing POSITIVE for ANABOLIC STEROIDS and related substances, OR who refuse to be drug tested IN-COMPETITION and/or OUT-OF COMPETITION receive a LIFETIME BAN in both the ADFPF & WDFPF.

TIME SCHEDULE:

Saturday, December 14: OFFICIAL WEIGH-IN BEGINS at 7:00 to 8:30 a.m.
RULES BRIEFING: 8:45 a.m.
LIFTING BEGINS at 9:00 a.m.

A.D.F.P.F. RULES: ADFPF members are encouraged to download the WDFPF RULEBOOK from the website: <http://adfpf.net/wdfpf/>

Chalk, Baby Powder/talc is allowed in designated areas.

ADFPF Cards may be purchased at the meet.

All personal equipment worn on the platform must be CLEAN, UNTORN and in GOOD repair.

Obscenities/profanities are **NOT allowed** on **ANY items** in the competition area.

ENTRY FORM for
ADFPF Indiana State POWERLIFTING & SINGLE EVENT Championships

COMPLETE, SIGN and RETURN BOTH PAGES of this ENTRY FORM with CHECK or MONEY ORDER payable to: Mike Stagg; 2920 Harmony Way; Evansville, In 47720; (812) 431-9113 Cell. Entries must be postmarked by November 17, 2018.

Please PRINT CLEARLY or TYPE: E-MAIL ADDRESS: _____

First name	Middle Initial	Last name	Gender	Weight Class in Kilos
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Street Address

City	State	Zip Code	Date of Birth	Age on Dec 14
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() _____ 2019 ADFPF #: _____
Home phone including area code Cell phone

2019 ADFPF Membership ADFPF WEBSITE: <http://adfpf.net/>
Please email stagg@twc.com if you have any issues registering.

Best UNEQUIPPED COMPETITION SQUAT: _____. Best EQUIPPED COMPETITION SQUAT: _____.

Best UNEQUIPPED COMP. BENCH PRESS: _____. Best EQUIPPED Comp. BENCH PRESS: _____.

Best UNEQUIPPED COMP. DEADLIFT: _____. Best EQUIPPED Comp. DEADLIFT: _____.

HAVE YOU EVER BEEN DRUG TESTED? _____
IF SO, APPROXIMATE DATE(S) OF TESTING: _____
HAVE YOU BEEN LIFETIME DRUG-FREE (please add detail as necessary)? _____
LIST MEDICATIONS taken during the past 2 weeks: _____
_____.

CHECK competition entered:

_____ **POWERLIFTING** (\$50.00). CIRCLE DIVISION: **UNEQUIPPED** **EQUIPPED**

_____ **SINGLE EVENTS** (\$50.00/1st Single Event, \$15/additional event(s))

CIRCLE EVENTS ENTERED (single event only): **SQUAT** **BENCH PRESS** **DEADLIFT**

CIRCLE DIVISION of each Event entered: **UNEQUIPPED** **UNEQUIPPED** **UNEQUIPPED**

EQUIPPED **EQUIPPED** **EQUIPPED**

Pre-Order \$20 Meet T-shirt, indicate SIZE & QUANTITY: S M L XL XXL XXXL

Total Entry fee + Shirt Order: \$ _____. Please make check payable to (credit cards accepted by calling meet director):

Mike Stagg
2920 Harmony Way
Evansville, IN 47720

For additional INFORMATION please phone: 812-431-9113 (cell).
Or email: stagg@twc.com

OFFICIAL RELEASE FORM CERTIFICATION:

I hereby give my word of honor that I have not used anabolic steroids or other anabolic agents that would be considered banned substances by the WORLD ANTI-DOPING AGENCY & the International Olympic Committee. I further agree NOT to use prescription diuretics in an effort to make weight **NOR** will I take psychomotor stimulants for this competition.

(Signature of athlete)

Date: _____

(Signature of parent/guardian if athlete is under 18 yrs of age)

Date: _____

Release From Liability:

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 entry form for "The Pit" Barbell Indiana State Open Powerlifting & Single Events Championships, I intend to be legally bound for not only myself but also my heirs, my executors and my administrators. In signing this release from liability, I waive and release anyone connected with this competition, i.e. "The Pit" Barbell Club, the Meet Directors, the A.D.F.P.F., or any persons associated with the competition from any and all liability which may arise from this competition.

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 the A.D.F.P.F. will NOT 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.

Moreover, I agree that the results of any testing method selected by ADFPF recognized testing officers for the purpose of detecting the presence of drugs, as listed on the International Olympic Committee (I.O.C.) banned substances list, SHALL BE CONCLUSIVE. I agree to cooperate fully with all required I.O.C. 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 that I might otherwise have won. 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 agree to pay any attorney fees and litigation expenses incurred by any person, real or corporate, which I may sue in effort to challenge this release from liability.

I understand that my agreement to pay attorney fees and litigation expenses is the SINE QUA NON for acceptance of my entry in this contest. 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.

Signature of athlete

Date: _____

(Signature of parent/guardian if athlete is under 18 yrs of age)

Date: _____