

USAPL
Battle on The Bayou Invitational

Official USA Powerlifting Sanctioned Championship

April 24, 2010

Location:

Paragon Casino & Resort
711 Paragon Place
Marksville, LA 71351
800-946-1946

Eligibility Requirements:

Must be a USAPL member (Membership cards can be purchased at weigh-ins)

Weight Classes (lbs):

Male: 114, 123, 132, 148, 165, 181, 198, 220, 242, 275 & SHW

Female: 97, 105, 114, 123, 132, 148, 165, 181, 198, 198+

Age Divisions/Groups:

Open (14 and Up)

Raw/Unequipped

Masters (40+)

Competition Lifting and Weigh-in Schedule:

Friday – April 23, 2010

5:00 to 6:00 pm – Early equipment check & weigh-ins

Saturday – April 24, 2010

07:00 to 08:30 am – Weigh-in/Equipment check for all weight classes

08:30 to 09:00 am – Rules briefing and/lifter warm-up

09:00 – Lifting begins for 1st flight lifters.

Awards:

Awards will be presented to the 1st – 3rd place finishers for each weight class in open and raw Division. Awards for Masters and Women's division will be presented to the 1st – 5th place finishers in both light weight and heavy weight category by IPF Wilks formula. Light and heavy Best Lifter Award will be presented.

Technical Rules:

This competition is USAPL sanctioned and all USAPL/IPF rules will be followed. If you are not familiar with these rules, they can be found at the following URL (S):

IPF Rules -- http://www.powerlifting-ipf.com/IPF_rulebook.doc

Hotel Information

HOTEL: Paragon. Rooms must be secured through promoter via attached Housing Request form.

Drug-Testing:

The contest will be drug-tested in accordance with USAPL/IPF/WADA guidelines. Any questions with regards to the drug-testing procedures should be directed to the USAPL drug-testing committee. Further information can be found at the following URL:

http://www.usapowerlifting.com/drug_testing/index.shtml



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Name _____ E-mail: _____
 (Please print E-mail clearly)

Address: _____

City: _____ State: _____ Zip Code: _____

Day Telephone: () _____ Evening Telephone: () _____

USAPL Membership Card #: _____ Expiration Date: _____
 (Can be purchased at the contest)

RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST:

Read this carefully (When you sign it you will be giving up important legal rights)

In consideration of the acceptance of my Entry Form in this Powerlifting Competition I intend to be legally bound, for not only myself but also for my heirs, my executors and my administrators. In signing this release from liability I waive and release everyone connected with this competition from any and all liability, including any result of negligence, which may arise from this competition. Moreover, I agree that any testing method, which the meet directors and the sponsors of this meet use to detect the presence of strength inducing drugs, **SHALL BE CONCLUSIVE**. This is, whether I think the results of the test are right or wrong, I agree that I have no right to challenge the results of the drug tests. I further agree to submit to any physical test, which may be necessary to complete the drug testing. Should I fail to pass the drug tests I agree to forfeit any trophy or award, which I might otherwise have won. I understand and agree that if I fail to pass the drug tests, my name will appear on a published list of suspended members. If it is determined that I have failed the drug test, I agree to waive any claim for which legal relief is available. I agree to pay any attorney fee and litigation expenses by any person, real or corporate, which I may sue in an effort to challenge this release from liability form. 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 force and effect. I also certify with my signature that this release/agreement cannot be modified orally.

Signature of lifter		Date	
Signature of Parent Or Legal Guardian <i>If Contestant is under 18</i>		Date	

Check the Divisions you will be lifting in:

- Men's Open Women's Open
 Raw/Unequipped Master's Open

Please specify the weight class that you will be lifting at: _____ Age: _____ Date of Birth: _____

PLEASE SPECIFY T-Shirt SIZE(s): Cost at Meet - \$15.00 each: M L XL XXL XXXL

ENTRY FEE (S): Place

- _____ \$60.00 – Powerlifting Competition
 _____ \$30.00 – Each additional Division Entered (You cannot enter both equipped and raw)
 _____ \$15.00 – Official Championship T-shirt [Small to XLarge] / Size Requested _____
 _____ \$20.00 – Official Championship T-shirt [XX-Large to XXXL] / Size Requested _____
 \$ Total Amount Submitted _____

APPLICATIONS MUST BE POSTMARKED BY NO LATER THAN FRIDAY, April 10, 2010! Max 60 entries
*Important Note: If your application/entry is late, you must notify the meet director either via e-mail, or by telephone.
 Late fee of \$30.00 will be assessed if post-marked after Saturday, April 10, 2010., No Refunds Granted!*

CHECK OR MONEY ORDERS PAYABLE AND MAILED TO THE FOLLOWING:

Checks made to: Wade Hooper - Contest Director
 8724 Sharlane Drive, Baton Rouge, Louisiana 70809
 Telephone: 225-620-7680 E-mail: wadehooper@cox.net



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HOUSING REQUEST FORM

This form is for reserving a room at Paragon Casino and Resort for **ATHLETES ONLY**. Louisiana Strength Foundation only has a select number of rooms that are blocked off for this event, and this method is used to secure rooms for the participants only, not friends and family members. How many people you cram into that room, however, is your business. You are only allowed to book one room per entry form. This makes sure that we have enough for all the athletes and staff. Your credit card information is only used to secure the room and will **NOT** be charged until you check out, or if you cannot make the competition, fail to cancel the room in a timely fashion. If you wish to stay at the hotel and receive the discounted rate of \$79 per night then fill out the information below and send it in with your entry form.

Please circle the following options that apply

Check in date: April 23rd or 24th

Check out date: April 24th or 25th

Number of beds in room: 1 or 2

Smoking? Yes No

Name to place the room under: _____

Name on credit card to secure the room: _____

Name of credit card (MC, Discover, Visa, etc): _____

Credit card number: _____

Expiration date: _____

