S.A. DRUG FREE POWERLIFTING ASSOCIATION INC



## **2023 OFFICIAL COMPETITION ENTRY FORM**

2023 COMPETITION DATE	3 Discipline Competition	Please tick \$80.00				
<u>National</u>	Squat, Bench and Deadlift					
<u>Championships</u>	OR					
Where: Cobdogla Club, Rowe St, Cobdogla SA	Single Discipline Competition	Squat Please tick Bench Deadlift				
When: Saturday August 26th.	Single Discipline Entry Fees					
Weigh in will start at 10 am sharp. Lifting to start at approx 12 am.	1 discipline - \$65.00	Total Fees Enclosed				
ENTRIES CLOSE MONDAY AUGUST 14th (NO EXCEPTIONS)	2 disciplines - \$102.50 3 disciplines - \$140.00	\$				
Р	ERSONAL DETAILS					
Name:						
Address:						
Date of Birth:	Phone No:					
Club:	Weight Class:					
Age:	Age Class:					
Raw or Assisted:						
I fully understand that I shall compete under the rules that the equipment used in the Competition is governe is of sufficient standard to meet the requirements of no	d by the rules of World Drug Free Powerl	ifting Federation. I also understand ifting Federation, which means that it				
Whilst the South Australian Drug Free Powerlifting As am aware that unforeseen incidents may occur, and w porated from any possible legal action. I understand th checked, use the warm up facilities provided, to partic	rish to exempt the South Australian Drug nat my entry fee only allows me to be weig	Free Powerlifting Association Incor- ghed in, have my equipment				
In consideration of the entry, I hereby intend to be legally I claims for damages against the South Australia Drug Free P isers and or assigns, and the sponsors of this contest, for a	owerlifting Association Incorporated ,the ma	nagement, committee members, organ-				
Lifter's Signature	Sign of State Assoc Sec					
Parent/Guardian Sign (if U18)	Today's Date					
Coach's Name Coach's Signature (If no coach write 'No Coach')	Today's Date					
Total Entry Fee \$	Fees to:	mpetition Entry Form and Entry				
Paid with (please circle)	SADFPA Treasurer PO Box 2072					
Cash Cheque/Postal Order EFT Transfer	Berri. SA. 5343 Email: srapson4@bigpond.com Cheques to be made payable to 'SADFPA Inc'. BSB: 805-050 Account Number: 61303262 If paying by EFT please use your name as a reference.					

## **Rules Concerning Disgualification Due To Misconduct**

It is a **condition of entry** that this form be clearly named, signed and attached to the competition entry form

(See 'WDFPF Rule Book 4 pg 10. Section 16 CONDUCT OF COMPETITION')

M. RULES CONCERNING DISQUALIFICATION DUE TO MISCONDUCT: Any lifter or coach, who by reason of misconduct on or near the competition platform which is likely to discredit the sport, shall be officially warned. If the misconduct continues, the Head Referee (or Technical Officer) may disqualify the lifter and order the coach to leave the venue. The lifter's coa must be officially informed of both warning and disqualification.

SA Drug Free Powerlifting Assoc. Inc. deems 'Misconduct' (at or in the competition venue) to be:

- 1) Bullying.
- 2) Loud, aggressive or intimidating behaviour.
- 3) Foul language (indecent or profane language).
- 4) Failing to treat the referees or any officials with absolute respect.

I .....have read, fully understand and accept this policy

(signed) .....

## **Special Notice**

Are you and/or your coach a member of, or associated with, any other Powerlifting group or organisation?

Yes No

If yes, you will be unable to compete in this competition due to the SA Drug Free Powerlifting Assoc constitution. Name (print)\_\_\_\_\_

Signature \_\_\_\_\_

## Competition Set up/Pack up

Assistance is required, from all lifters, with setting up and packing up the competition equipment. Set up will take place on competition day, immediately after the weigh in.

#### Open Powerlifting

I do/do not consent to my competition results being forwarded to Open Powerlifting. I understand that my age will also be given to this organisation. Signed

## **Presentation Dinner**

Please indicate how many will be attending the presentation dinner after the competition. It will be held at the Cobdogla Club at 6.00 pm. Number attending

#### RELEASE FROM LIABILITY and CONSENT TO DRUG TEST:

# **NOTE:** (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 to South Australian Drugfree Powerlifting Association competitions, I intend to be legally bound for not only myself, but also my heirs, executors and my administrators.

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 South Australian Drug Free Powerlifting Association 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.

In signing this release from liability, I waive and release anyone connected with this competition; i.e. the meet directors, South Australian Drugfree Powerlifting Association, the competition sponsors and staff, the contest facilities or any persons associated with the competition from any and all liability, including any results of negligence which may arise from this competition. Moreover, I agree that any testing method selected by SADFPA recognized testing officers may be applied to detect the presence of drugs, as listed on the World Anti-Doping Agency (WADA) banned substances list which SHALL BE CONCLUSIVE. I agree to co-operate fully with all required IOC & WADA 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 which I won during the championships and I also forfeit any previous trophy, award, record or placing should the offence be deemed serious enough, according to WDFPF rules, to warrant such an action. I understand and agree that if I fail to pass the drug testing process, my name will appear on a published list of suspended members. If determined that I failed the drug test, I agree to waive any claim for which legal relief is available. 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 understand that my agreement to pay attorney fees and litigation expenses is the SINE QUA NON for acceptance of my entry in this championship. 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:
(If lifter is under 18 years of age, complete the following :)	
Signature of parent/guardian:	<u>.</u> Date:
Certification: Thereby give my word of honor as an athlete that Th	ave not used any strength ind

<u>Certification:</u> I hereby give my word of honor as an athlete that I have not used any strength inducing drugs (I.e., any anabolic steroid, natural hormone or synthetic growth hormone) as part of my training during the past sixty months (five years), nor have I used or will I use prescription diuretics or psychomotor stimulants during the seven days prior to this competition.

Signature of athlete:

Date:				