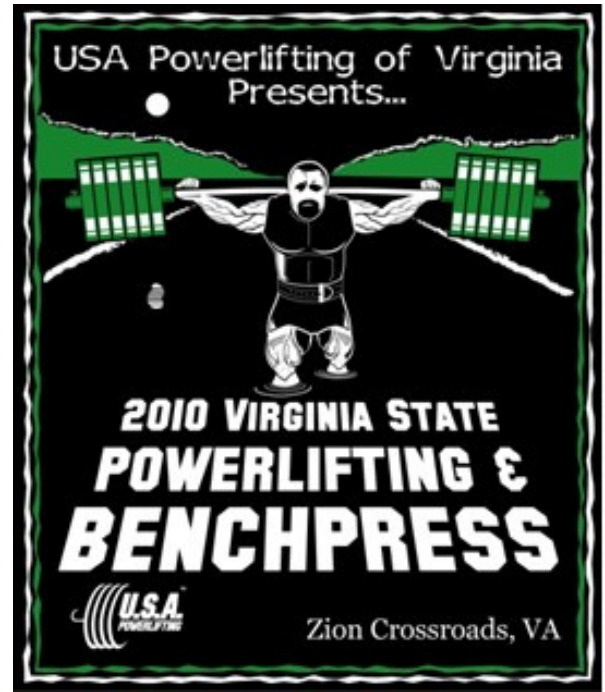




**25th ANNUAL
VIRGINIA STATE
POWERLIFTING
BENCH PRESS
DEADLIFT
IRONMAN
SEPTEMBER 11, 2010**



WHERE

Best Western Crossroads

135 Wood Ridge Terr, Gordonsville, VA 22942

The hotel is located right off Exit 136

On I 64 in Zion Crossroads.

www.bestwesternvirginia.com/hotels/best-western-crossroads

WHEN

Saturday SEPTEMBER 11, 2010

Equipment check & Weigh-in - 7-8:30 A.M.

Lifting begins at 9 A.M

No Early weigh ins

WHO

Lifters and teams must be registered with the USAPL and must be drug free by the definition of the USAPL. USAPL registrations will be available at the meet. A minimum of 10% of lifters will submit to a urinalysis drug test.

The first 60 lifters to enter will be accepted for the meet.

AWARDS

1st thru 5th in each class and age group in Open, Teenage, and Master, Male and Female

RAW and Equipment all weight class all age divisions

In full power, bench press, deadlift, Ironman

1st thru 3rd Team

WEBSITE

<http://www.virginiapowerlifting.blogspot.com>

WEIGHT CLASSES

Men: 123 132 148 165 181 198 220 242 275, UNL

Women: 105 114 123 132 148 165 181 198 UNL

SPECTATOR ADMISSION

\$7.00. 12 and under free

ENTRY FEE

\$65.00 per entry \$30 for each additional divisions
(NO REFUNDS)

ENTRIES MUST BE POSTMARKED BY August 20, 2010

RULES

USAPL rules will apply. www.usapowerlifting.com

MEET DIRECTOR:

John Shifflett 434-985-3932

Valifting@aol.com



Mail entry form and make payment to:

John Shifflett

186 Happy Hollow Road Ruckersville, VA 22968

USAPL VIRGINIA STATE

ENTRIES MUST BE POSTMARKED BY August 20, 2010

In consideration of your accepting this entry, I hereby for myself and my heirs, release any & all rights/claims for damages for injuries I may have against American Legion Post #128 USA Powerlifting, American Drug Free Powerlifting Association, John Shifflett, William Morris, all other meet directors & staff, and any & all other participating sponsors, supporters, referees, and spotter/loaders as a result of my traveling to, and/or from and/or participating in, the above listed competition. I make this release and waiver of claim with full knowledge of the hazards and inherent rights associated with the above listed competition. I hereby assume the risk of injury and property damage/loss. Also, in consideration of your accepting this entry I hereby sign over my rights to be video taped and/or photographed to the meet directors and/or his designee. I am fully aware that I will receive no royalties and/or compensation for resale/use of the videotapes and/or photographs.

RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST

IMPORTANT: READ THIS RELEASE CAREFULLY. WHEN YOU SIGN IT YOU WILL BE GIVING UP IMPORTANT LEGAL RIGHTS.

In consideration of the acceptance of my entry 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 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 which the meet director and the sponsors of this meet use to detect the presence of strength-inducing drugs SHALL BE CONCLUSIVE. That is, whether I think results of the tests 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 tests which may be necessary to complete drug testing. Should I fail to pass drug tests, I agree to forfeit any trophy or award which I 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 incurred by any person, real or corporate, whom 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 the acceptance of my entry in this contest. If any provision of this release form liability shall be deemed by a court of competent jurisdiction to be invalid, the remainder of this Release of Liability shall remain in full force and effect. I also certify with my signature that this release/agreement cannot be modified orally.

Certification: 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 thirty six months, nor have I used prescription diuretics or psychomotor stimulants during the seven days prior to this meet.

Signature in full of applicant

Signature in full of parent or guardian

2010 USAPL VIRGINIA STATE ENTRY FORM

First Name: Last Name:

Age: Sex: M F Birthdate: Address:

City: State: Zip:

Tele: Email:

USAPL Card #: Wt. Class: Full Meet BP Only DL Only

Ironman BP & DL RAW Equipment

Circle Divisions entering:

Women OR MEN Open, Teen 14-15,16-17,18-19, 20-23, Master 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, Special Olympian, College, Police and Fire