



PHANTOM WARRIORS POWERLIFTING TEAM Presents:
The 2014 USA POWERLIFTING
MASTER'S NATIONAL CHAMPIONSHIPS
MAY 2th-4th, 2014
SANCTION #NS-2014-07

MEET DIRECTOR: Johnny A. Graham, (254) 526-0779
FAX: (254) 616-5725
CELL: (254) 338-5597

PLACE: Courtyard Marriot Hotel of Killeen Ballroom (Formerly Plaza Hotel)
1721 East Centex Expressway Killeen, TX 76541

TIME: **FRIDAY, 2 MAY 2014**
Equipment Check 5:00-7:00 PM **53-84 KG CLASSES**
Masters National Meeting 7:00-9:00 PM

SATURDAY, 3 MAY 2014
Weigh-Ins/Equipment Check: 7:00-8:30AM 53-66 kg class
Lifting: 9:00 AM
Weigh-Ins/Equipment Check 1:00-2:30PM 74-83 KG CLASS
Lifting: 3:00 PM

Registration and Equipment Check 6:00-8:00PM 93-120+ CLASSES

SUNDAY, 4 MAY 2014
Weigh-Ins/Equipment Check: 7:00-8:30AM 93-105 KG CLASSES
Lifting: 9:00 AM
Weigh-Ins/Equipment Check: 12:00-1:30PM 120-120+ kg class
Lifting 2:00 PM

*****TIME SCHEDULE SUBJECT TO CHANGE, DEPENDING ON ENTRIES.**

IMPORTANT: This event is a World Qualifier for the 2014 Masters World Powerlifting Championships.

ENTRY FEE: \$70.00 PER LIFTER , \$70.00 PER TEAM.

MAKE CHECKS PAYABLE TO: JOHNNY A. GRAHAM
2203 EXCEL DRIVE
KILLEEN, TEXAS 76542

DEADLINE: APRIL 10, 2014. **ALL ENTRIES MUST BE POSTMARKED BY THIS DATE.**
LATE FEE \$90 "NO REFUNDS PERMITTED AFTER DEADLINE DATE"

AWARDS: 1ST-5TH EACH WT CLASS, 5 YEAR AGE GROUPS INCREMENTS. TEAM: 1st - 3rd, 40-49 Age Group, 50-59 Age Group, 60-69 Age Group, and Combined Age Groups. *** PLEASE BE ADVISED, THAT WORLD TEAM SELECTION WILL BE USED, USING THE 10 YEAR IPF AGE GROUPS***, Outstanding lifter awards: 10 YEAR AGE GROUPS

MEET HOTEL: Courtyard Marriot , \$109.00 + Tax. All King rooms have a Pull out Sofa/sleeper.. You must mention the Master's National Powerlifting Championships to receive this discount. Regular rate is \$139.00 per day + Tax. **Courtyard Marriot 254-616-2000**

ELIGIBILITY: Open to all USA Powerlifting registered Master's lifters. Lifters 39, 49, 59 69, who will have a Birthday during the Calendar year, be in the "Official Age" Group for the Championships. Registration cards can be purchased during the early Equipment check. **All lifters must be drug free for Thirty-six (36) months.**

ADMISSIONS: \$10.00 A DAY. \$15.00 WEEKEND PASS.
MAX OF TWO (2) COACHES PER TEAM ADMITTED FREE.

WEIGHT CLASSES KG: Men 53 59 66 74 83 93 105 120 120+

"QUALIFYING TOTALS ARE BASED ON USAPL WEIGHT CLASSES FOR CLOSES TOTAL OF WEIGHT CLASS ENTERED"

FOR THE BEST IN POWERLIFTING GEAR CONTACT
TITAN SUPPORT SYSTEMS 361-991-6749

ENTRY FORM

NAME: _____ AGE: _____ BIRTHDAY: _____

ADDRESS: _____
STREET / CITY / STATE / ZIP

PHONE: (_____) _____ WEIGHT CLASS _____

USAPL# _____ TEAM: _____ BEST TOTAL: _____

ADVANCE SHIRTS (\$15.00 ea.) *specify quantity and sizes* _____

In consideration of my entry, I intending to be legally bound, hereby, for myself, my executors, and administrators, waive and release the USAPL, Courtyard Marriot of Killeen, the Meet Director, their agents, representatives, committees, and members from any and all claims or Rights to damage from injuries or losses suffered by me directly or indirectly competing in or attending the 2014 USAPL MASTER'S NATIONAL POWERLIFTING CHAMPIONSHIPS.

I agree to abide by the USAPL rules governing this event.

SIGNATURE: _____ DATE: _____

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. I signing this release from liability I waive and release everyone connected with 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 the drug test 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 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 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 IN FULL OF APPLICANT _____

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 (36) months, nor have I used prescription diuretics or psychomotor stimulants during the seven days prior to this meet.

SIGNATURE IN FULL OF APPLICANT _____