

## 2008 Nebraska AAU High School Powerlifting Invitational



April 19, 2008 Beatrice Senior High School 600 Orange Blvd, Beatrice, NE. 68310

**SCHEDULE OF EVENTS:** Friday, April 18th, Early Weigh ins-6:30-7:30pm.

Saturday, April 19th WEIGH INS/EQUIPMENT CHECK-7:00am-8:30am.

LIFTERS RULES BRIEFING-8:30am.

LIFTING STARTS-9:00AM.

This will be a 2 platform contest! Concessions available.

**ELIGIBILITY: OPEN TO ALL HIGH SCHOOL AGED STUDENTS** 

**ENTRY FEES:** \$30 per lifter (Individual) AAU Membership included with entry fee. High School Team Entry Fee - \$40 per team per division (Boys, Girls, Co-Ed). All Individual fees must be included with team fee and roster.

**RULES**: This meet will be sanctioned by AAU Powerlifting. All lifters will register with AAU at meet. Lifters who are current AAU members should contact meet director prior to entry.

**TEAMS:** Teams may consist of up to max of 10 lifters/with no more than two lifters per weight class. Co-Ed teams may have no more than 7 boys or 7 girls. Final roster changes will be allowed up to 8 am Saturday. Team scoring will go 7, 5, 3, 2, 1. No team entries accepted after deadline.

**ENTRY DEADLINE**: Tuesday April 8<sup>th</sup>! No entries postmarked after this date will be accepted unless prior Meet Director approval is obtained. No full Refunds!

## **WEIGHT CLASSES:**

Boys: 97, 105, 114, 123, 132, 148, 165, 181, 198, 220, 242, 275, 308, UNL

Girls: 97, 105, 114, 123, 132, 148, 165, 181, 198, UNL

**AWARDS:** Individual 1<sup>st</sup>-5<sup>th</sup> place medals in each weight class. Team awards; 1<sup>st</sup>-3<sup>rd</sup> place trophies for each division, Boys, Girls, & Co-Ed. Overall Best Male and Female lifter awards.

**ATTIRE:** Gym shorts must be above the knee in length! Lifters with too long of shorts will be asked to roll them up! If knee wraps are worn they can not touch shorts. No Cut off, Baggy or Compression shorts! No sweatshirts or pants! T-shirts must be short sleeved, & tucked in (No sleeveless shirts). Single ply lifting suits and bench shirts will be allowed. Lifting Belts can not be wider than 4 inches. No Velcro or padded Belts! No Lifting Gloves! No hats or bandannas. Indoor athletic type shoes should be worn. Questions about your lifting equipment should be asked during rules briefing or at weigh ins. Lifters missing all 3 lifts of same type will not place.

For information: Contact the Meet Director, Monte Lofing @ 402-223-2269 evenings before 9 pm, please, or on weekends, or email: <a href="lofing@alltel.net">lofing@alltel.net</a> This contest space is limited to the first 100 lifters!

Entry Deadline – April 8, 2008	
NAME:	CATEGORY ENTERED
ADDRESS:	Raw Equipped
CITY: STATE: ZIP: PHONE#:	
E-MAIL: DATE OF BIRTH:	Entry Fees \$_30 Team Fee \$
BEST LIFTS: SQUATBENCHDEADLIFT WEIGHT CLASS:	Total Enclosed \$
	Send Entry Form & Fee to:
AAU Membership #	Monte Lofing
High School: Grade: FR SO JR SR	1423 Grant Street Beatrice, NE 68310
	Phone: 402-223-2269
RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST	lofing@alltel.net
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	
DRUG TESTING CONSENT FORM FOR	
AMATEUR ATHLETIC UNION POWERLIFTING	
(Print Name Here)  I understand that in order to participate in this event or any Amateur Athletic Union Powerlifting (AAUPC) event, and having read the Adult Substance Abuse Program Summary, do hereby consent to be drug tested by urinalysis. I further agree that if I have a positive result, refuse to be tested or fail to appear for testing that I will automatically be disqualified from this event and any future AAUPC event and may be subject to further penalties and or sanctions under the rules of the AAU Code Book. I also understand that if I test positive, refuse to be tested or fail to appear for testing, that I am eligible for a AAU Review Board hearing to challenge these results, my refusal to be tested, or my failure to appear. If after the hearing, and I am found in non-compliance with AAU Powerlifting Substance Abuse policy, I consent to the publication of my positive test results, refusal to be tested or failure to appear, on the AAUPC web page at the AAU web site. I understand and agree that both the collection process and the testing procedures will be performed by a third party (not AAU Powerlifting or the AAU), and in accordance with AAU Powerlifting policy, I agree that this Drug Testing Consent form will be in effect for one (1)year from the date of its signing. The parties agree that if any part of this consent form shall be deemed invalid and or unenforceable, the remainder of said consent shall remain in full force and effect. I have read this consent form and fully understand and agree with its contents. I also understand, if I am selected to be tested, that I may be required to sign this document again.	
TODAY'S DATE	
SIGNATURE DATE OF BIRTH	
STREET ADDRESS	
CITYZIP CODE	
PHONE NUMBER	
E-MAIL ADDRESS	
WITNESS (Print name)SIGNATURE	
9/2002	