<u>Midwest Monsters of the Bench</u>



Date: Saturday, August 7, 2021 **Location:** Round The Bend Steakhouse, 30801 E Park HWY, Ashland, NE **Time:** 11:00am **Rules Briefing:** 10:30am **Weigh Ins:** Friday TBA & Saturday 9am-10:30am **MEET STARTS AT 11AM! THIS IS A BENCH PRESS ONLY MEET**

BE PREPARED!

Uniform: Singlet is required. T-Shirt required under singlet. <u>If you are out of</u> <u>uniform, you will not lift.</u> All bench shirts are allowed in the equipped division. RAW means no bench shirt.

Meet Director: Rich McDowell

Sanction: Warriors Powerlifting Federation - WPLF

Entry Fee: \$75 Combine Bench Press \$30 Eligibility: Open to any athlete 13 years or older. Entries must be paid mailed in by July 25

SEND ENTRY FORM & MAKE CHECKS OR MONEY ORDERS PAYABLE TO: RICH MCDOWELL 500 HWY W Rocky Mount, MO 65072

PREFERRED CONTACT: WARRIORSPOWERLIFTINGFEDERATION@GMAIL.COM PHONE: 573-692-0096

CHECKS MUST CLEAR BEFORE EVENT!

(DETACH HERE)

Midwest Monsters of the Bench ***CIRCLE ALL YOUR EVENTS AND DIVISIONS***

RAW	SINGLE PLY			MULTI PLY			SOFT GEAR			COMBINE CHALLENGE		
	TEEN		JR 20-2	23	OPEN		SUB N	IASTE	R 35-39)	MASTI	ER
97	105	123	132	148	*W 165	eight o 181	lass* 198	220	242	275	308	SHW

Entries paid after July 25 will need to be paid for online or with cash at the meet. You must have a WPLF membership card to compete. Membership cards are \$35 and good for 1 year from the date of the meet.

I know that participation in a powerlifting competition is potentially dangerous. I should not enter unless I am able and properly trained. I understand and agree that Rich McDowell, Christina McDowell, Danielle Clark or the WPLF, Round the Bend Steakhouse, nor its employees or officers may be held liable for any occurrence in connection with this competition, which could result in injury, death, or damages to me. In consideration of being allowed to compete in this event, I hereby assume all risks in connection with this event and release Rich McDowell, Christina McDowell, Danielle Clark, the WPLF, Round the Bend Steakhouse, its weightlifting club operators, spotters and all other employees or officers or persons in any way connected to this event or the WPLF, for any injury or damage which may happen to me while I am engaged in this event, including all risk connected therewith, whether foreseen or unforeseen, and I do further agree to save and hold harmless the WPLF and all the above mentioned from any claim by, or by my heirs, executors, administrators, personal representatives and assigns arising out of my participation in this event. By signing, I understand and agree with all that is written above.

NAME:			DATE OF BIRTH:					
AGE:	SEX:	MAILIN	NG ADDRES	\$S:				
CITY:		STATE:	Z	IP CODE:				
PHONE:		EMAIL	:					

(ALL ENTRIES MUST BE COMPLETED TO ENTER)

SIGNATURE:_____

(LIFTER, PARENT OR GUARDIAN IF UNDER

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