



THE MAGIC CITY GAMES

“Experience the Magic”

2nd Annual Powerlifting Meet

MEET DIRECTOR: Bill Duncan Cell: 410-474-1071
Email: bill.e.duncan@gmail.com

PLACE: Randolph Area YMCA
1000 Kwix Road, Moberly, MO 65270

TIME: **SATURDAY JUNE 28th 2014**
Registration & Equipment Check 7:30-8:45 AM Rules Meeting at 8:45 AM Lifting Begins at 9:15 AM

Men’s – Women’s – Master’s & Open Classes

LIFTING SCHEDULE SUBJECT TO CHANGE, DEPENDING ON NUMBER OF ENTRANTS.

ENTRY FEE: \$35.00 PER LIFTER

MAKE CHECKS PAYABLE TO: Bill Duncan, 1106 Luther Drive, Mexico, MO (write Magic City Powerlifting on Memo line)

**DEADLINE: JUNE 13, 2014. ALL ENTRIES MUST BE POSTMARKED BY THIS DATE.
NO LATE ENTRIES ACCEPTED**

Please type or PRINT CLEARLY your complete E-MAIL ADDRESS: _____

NAME:

(Last) (First) (M.I.)

Date of Birth: ____-____-____
Month Day Year

Complete POSTAL Address:

(Street Address & Street Name)

Age on June 28th: _____

PHONE #: _____

(City) (State) (Zip Code)

CELL #: _____

Gender: ____.

Competition WEIGHT CLASS in POUNDS: ____.

WEIGHT CLASSES:
Women 97 105 114 123 132 148 165 181 198 SHW
Men 114 123 132 148 165 181 198 220 242 275 SHW

MEET T-SHIRT: Magic City Games T-shirts for participants will be provided with paid entry (by entry deadline). Additional shirts will be available for \$10 on meet day.

Shirt size and number: ____ XS ____ S ____ M ____ L ____ XL ____ 2XL
____ 3XL ____ 4XL



EQUIPMENT:

The only supportive equipment allowed is the LIFTING BELT & WRIST WRAPS. Lifters must wear a NON-SUPPORTIVE SINGLET (or shorts) & Cotton T-shirt. Shoes, boots or slippers are required in each event along with Knee Socks for the DEADLIFT.

AWARDS:

Best Lifter Trophy for male and female best lifter (by formula); medals for 1st-3rd place by weight category.

RELEASE FROM LIABILITY :

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 for the Magic City Games Powerlifting Competition, I intend to be legally bound for not only myself, but also my heirs, executors and my administrators.

Additionally, I understand that lifting heavy weights is an inherently hazardous activity and that participation in this sport exposes me to the risk of injury or death. I further understand that no person or persons connected with this activity will 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 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.

All athletes, coaches, officials, referees, and platform personnel acknowledge and understand and agree that they will act responsibly and respectfully at all times. They will also exhibit outstanding sportsmanship in keeping with the values, ideals, and spirit of drug free sport and will encourage others to do the same.

CLEARLY PRINT ATHLETES FULL NAME: _____

Signature of athlete: _____ Date: _____.

(If lifter is under 18 years of age, complete the following:)

Signature of parent/guardian: _____ Date: _____.