**2016 USA Powerlifting WESTERN WISCONSIN OPEN**

***SANCTIONED BY U.S.A. POWERLIFTING #WI-2015-09***

**(Formerly known as the Hudson Natural Open)**

**DATE:** October 29, 2016

**SITE:** Hudson House Grand Hotel

1616 Crestview Drive

Hudson, Wisconsin 54016

715-386-2394

**Schedule:** 7:30A.M. to 9.A.M. weigh-ins and equipment check for all Women, Teen and Master Men. The first lifting session will begin at 9:30 A.M.

Weigh-in and equipment check for Equipped Open Men, Raw Open Men and Master Men to be from 11:30 A.M. to 01:00 P.M. The second lifting session will begin at 01:30 PM.

**NOTE:** Weigh in time may vary from scheduled start time for 2nd session, depending on the number of lifters in first session.

**Divisions:** (Large divisions may be divided in to heavy and light classes depending on the participation.)

**Equipped**

Men’s Open, Women’s Open, Teen/male, Teen/female, Master Men, Master Women

**Raw**

Raw Men, Raw Women, Raw Teen-male, Raw Teen-female, Raw Master Men, Raw Master Women

**Eligibility:** All **U.S.A. Powerlifting card holding members** who have not used strength inducing drugs in the last 3 years (36 months), and prescription diuretics or banned stimulants in the 7 days prior to the contest.

**Please Note:** **Membership cards *will not be available* for purchase at the meet.**

* **Please purchase your membership online at: http://www.usapowerlifting.com**
* **High school lifters must purchase a full year membership.**

**This is a drug tested meet! Be careful what you ingest! Some supplements can cause drug test failures. Only IPF approved gear will be allowed.**

**Entry Fee: $65.00 first division, $30.00 each additional division (NO REFUNDS)**

**T-shirts: $15.00 (A limited number of T-shirts will be sold at the meet. You are encouraged to pre purchase shirts to be sure of size and availability)**

**Make checks payable to:** **Western Wisconsin Open**

**Mail to:** **Western Wisconsin Open**

**℅ Chuck Eaton**

**N8862 1047th Street**

**River Falls, WI 54022**

**Phone:** 715-426-4847 or 715-307-0932 or 715-425-1651 (Please, no calls after 8:00 p.m.)

**Entry Deadline:** This meet will be limited to the first 60 entries received. Deadline is either October 14th, or when the first 60 entries are received.

**Awards:** Awards will be given to the first three place finishers in each division by **formula**.

**Directions:** The meet site for this competition is the Hudson House Grand Hotel. It is located on the south side of I-94 just north of Fleet Farm. Take Exit 2 off of I-94, turn south then turn west (towards Minneapolis) onto Crestview Drive. If you are planning on staying at the hotel, please tell them you are there for the meet to receive discounted room rates. The Hudson House is a very nice hotel with a sauna, pool, whirlpool, restaurant and bar.

**WESTERN WISCONSIN OPEN**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_\_

Weight \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(for flight purposes) Membership Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please refer to **Eligibility** on first page)

Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(optional, but very handy)

Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(optional, but texting is faster)

**Divisions entered:** (circle below) **Please remember you are either equipped or raw, but not both.**

**Equipped**

Men’s Open, Women’s Open, Teen/male, Teen/female, Master Men, Master Women

**Unequipped**

Raw Men, Raw Women, Raw Teen-male, Raw Teen-female, Raw Master Men, Raw Master Women

**T-shirts:** (please order with your entry)

Size(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number that you want\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(x $15)

Total for T-shirt order:\_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RELEASE FROM LIABILITY**

**READ THIS RELEASE CAREFULLY. WHEN YOU SIGN IT, YOU WILL BE GIVING UP IMPORTANT RIGHTS.**

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 USA Powerlifting, American Drug Free Powerlifting Association, USA Powerlifting of Wisconsin, Charles Eaton, Ray Curtis, Al Dusek, 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 accepting this entry, I hereby sign over my rights to be videoed and/or photographed to the meet directors and/or his designee(s). I am fully aware that I will receive no royalties and/or compensation for resale/use of the videotapes and/or photographs.

In consideration of the acceptance of my entry in this competition I intend to be legally bound, for not only myself but also for my heirs, assigns, executors, trustees and 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 and all 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 fees 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.

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(Competitor’s Signature)

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Signature of parent or guardian if applicant is under 18 years old.

**Application must be filled out, signed and entry fees received to be considered an entrant into this competition.**