



**2012 BRITISH OPEN CHAMPIONSHIPS
RECORD BREAKERS**

BENCH PRESS & DEAD LIFT

Venue: Ripped Gym, 4 Wych Elm, Harlow, Essex CM20 1QP

Entry to BPO by NO later than 18th November

Meet Director: Michelle Meade (07779 322717)

Date: Sunday 9th December

ENTRY FORM (fill in ONE form per event for every participant)

Your full name: (First)		(Last)	
Address:		Telephone No:	
E-Mail:			
British Powerlifting Organisation Membership Number			
Age Category (Circle appropriate category)		Teenager	Junior
M40+,M45,M50+,M55+,M60+,M65+,M70+,M75+,M80+		15-19	20-23
Date of Birth (Proof of age required at weigh-in)		AGE:	
Entering competition in (Circle)		Bench Press	Dead Lift

Weight Class (Circle the appropriate Category)

Men's	(56)	(75)	(100)	(125)
	(60)	(82,5)	(110)	(140)
	(67,5)	(90)		(140+)
Women's	(48)	(56)	(67,5)	(82,5)
	(52)	(60)	(75)	(90)
				(90+)

I hereby agree to enter this competition on the following terms:

That I am a member of the BPO.

*That I take part entirely at my own risk and that there shall be **NO** liability whatsoever on the part of the Meet Director, the British Powerlifting Organisation, its officers, employees or agents for any loss, damage or injury suffered by me, howsoever caused.*

That I know of no reason why I should not take part on the grounds of ill health.

*I enclose my **£25** entry fee for **EACH** entry, payable to the British Powerlifting Organisation, which is non-refundable.*

*All entry forms and fees to be sent to the British Powerlifting Organisation, to be received by **NO LATER than the 18th November 2012***

I agree to produce at the weigh-in proof of my age by passport or photographed driving licence.

I agree to abide by all the WPF rules for Powerlifting, Bench Press and Dead Lift.

I hereby waive, release, and discard any and all claims for damages, death, personal injury or property damage which I may have or which may hereafter occur to me as a result of my participation in said event. This release is intended to discharge in advance, Michelle Meade, the BPO, or the Ripped Gym, and any other unnamed sponsors, officials, agents, or representatives of these individual organizations from and against all liability arising out of or connected in any way with my participation in said event, even though that liability may arise out of the negligence or carelessness on the part of persons or entities mentioned above. I understand that I am not covered for any personal injury and/or property damage under any medical or liability insurance policies of any of the aforementioned parties or any other sponsors. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Signature of Competitor: _____ Date: _____:

Signature of Parent/Legal Guardian: _____ Date: _____

If competitor is under 18 years old

RETURN ENTRY FORM(S) AND FEES TO : BRITISH POWERLIFTING ORGANISATION

"Lavieville", Field Way, Tongham, Farnham, Surrey. GU10 1BQ Great Britain

Tel: 0044(0)7770 757321 - Fax: 0044(0)1252 325690 - E-mail: davidtcarter@live.co.uk

Web: www.britishpowerliftingorganisation.co.uk