

**POWERLIFTING, BENCHPRESS& DEADLIFT CHAMPIONSHIPS**

**ENTRY FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **FIRST NAME** |  | **FAMILY NAME** |  |
| **NATIONALITY** |  | **WEIGHT CLASS** |  |
| **DATE OF BIRTH** |  | **AGE CLASS****BEING ENTERED** |  |
| **POSTAL ADDRESS** |  | **E-MAIL ADDRESS** **PHONE NUMBER** |  |

**I WISH TO ENTER THE FOLLOWING EVENTS:**

|  |  |  |  |
| --- | --- | --- | --- |
| ***Event*** | ***Yes/No*** | ***Event*** | ***Yes/No*** |
| **RAW POWERLIFTING** |  | **EQUIPPED POWERLIFTING** |  |
| **RAW BENCHPRESS** |  | **EQUIPPED BENCHPRESS** |  |
| **RAW DEADLIFT** |  | **EQUIPPED DEADLIFT** |  |

**PAYMENT OF ENTRY FEES:**

|  |  |  |
| --- | --- | --- |
| ***Option*** | ***Yes/No*** | ***Entry Fee Amount*** |
| **I have forwarded the relevant entry fee to my National Federation**  |  |  |
| **I have lodged the relevant entry fee to the Promoter’s account** |  |  |
| **I will pay the entry fee (including the late fee) at the venue** |  |  |

**This entry form must be sent to your national federation for inclusion on your national team list.**

**Only lifters from countries where GPC is not represented & thus wish to lift as individual GPC members should email this form to:** **l.hurdalek@volny.cz****&****worldgpcsecretary@gmail.com**

I hereby acknowledge, agree and confirm the following:

1. I understand the Rules promulgated in terms of the Constitution of the Global Powerlifting Committee.

2. There are inherent risks associated with participation in the 2014 GPC European Championships which may result in personal injury (even of a serious nature) to me. I am aware of the risks and accept these risks.

3. To the full extent permitted by law, I absolve, release, discharge and indemnify the GPC, its officers, employees, organisers, representatives, helpers/spotters/loaders and/or agents (“the Indemnities”) from any and all liability from any and all claims, demands, rights or action or causes of action, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of my participation in the Championships, for any personal injury, mental anguish, loss or damage of any kind suffered by me, including, without limitation, where caused by any acts or omissions (intentional or negligent) of the Indemnities.

4. In the event of such injury, first aid/medical officials/practitioners may attend to me while injured. Should I have to receive treatment at a hospital or any medical institution due to any injury I will be responsible to pay my own expenses.

5. I declare that I have read and understood the above and accept full responsibility for my safety during my participation in these Championships, and I waiver any claim I might have against the GPC and/or the Indemnities. I was not unduly influenced and sign this form freely and voluntarily

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**Signed**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: In the case of a minor (any person under the age of 21 years of age) I confirm that my parent(s) and or legal guardian who has been notified either personally, telephonically or electronically of my intended participation in the Championships and has either personally, telephonically or electronically given his / her / their permission to do so.