



PHANTOM WARRIORS POWERLIFTING TEAM Presents:
The 2009 USA POWERLIFTING
HIGH SCHOOL NATIONAL CHAMPIONSHIPS
APRIL 3RD-5TH, 2009

MEET DIRECTOR: Johnny A. Graham, (254) 526-0779
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PLACE: Killeen Civic & Conference Center
3601 South WS Young Drive Killeen, TX

TIME: **THURSDAY 2 APRIL 2009**
Registration & Equipment Check 6:00-8:00 PM Females JV 97-SHW class
Males JV 114-SHW class

FRIDAY, 3 APRIL 2009
Weigh-ins & Equipment Check 7:00-8:30 AM Females JV 97-148 lb class
Lifting 9:00 AM Males JV 114-165 lb class

Weigh-ins & Equipment Check 1:00-2:30 PM Females JV 165-SHW class
Lifting 3:PM Males JV 181-SHW class

Registration and Equipment Check: 6:00-8:00PM Females Varsity 97-165 lb class
Males Varsity 114-181lb class

SATURDAY, 4 APRIL 2009
Weigh-Ins/Equipment Check: 7:00-8:30AM Females Varsity 97-132 lb class
Lifting: 9:00 AM Males Varsity 114-148 lb class

Weigh-Ins/Equipment Check 1:00-2:30PM Females Varsity 148-165 lb class
Lifting: 3:00 PM Males Varsity 165-181 lb class

Registration and Equipment Check 6:00-8:00PM Females Varsity 181-SHW
Males Varsity 198-SHW

SUNDAY, 5 APRIL 2009
Weigh-Ins/Equipment Check: 7:00-8:30AM Females Varsity 181-SHW
Lifting: 9:00 AM Males 198-220 lb class

Weigh-Ins/Equipment Check: 12:00-1:30PM Males 242-SHW
Lifting 2:00 PM

IMPORTANT: This event is a World Qualifier for the 2009 Sub Jr. and Jr. World Powerlifting Championships.

ENTRY FEE: \$65.00 PER LIFTER , \$60.00 PER TEAM.

MAKE CHECKS PAYABLE TO: JOHNNY A. GRAHAM
2203 EXCEL DRIVE
KILLEEN, TEXAS 76542

DEADLINE: MARCH 15, 2009. ALL ENTRIES MUST BE POSTMARKED BY THIS DATE.
LATE FEE \$90 "NO REFUNDS PERMITTED AFTER DEADLINE DATE"

AWARDS: 1ST-5TH EACH WT CLASS, EACH DIVISION. All lifters will get a participation award.
Outstanding lifter awards: Male: 114-148, 165-198, 220-SHW JV and Varsity
Women: Lightweight & Heavyweight Jr. Varsity & Varsity

MEET HOTEL: The Shiloh Inns and Suites, \$95.00/109.00 Kitchenettes, Comfort Suites, Plaza Hotel and Howard Johnson of Killeen will be offering double rooms for the price of \$86.00 per day. You must mention the High School National Powerlifting Championships to receive this discount.
Shiloh Inns 254-699-0999, Comfort Suites, 254-634-5560, Plaza Hotel: (800) 633 8756, Howard Johnson: (254) 526-4343

ELIGIBILITY: Open to all USA Powerlifting registered High School lifters. Students **MUST** be enrolled in the School that they are lifting, and **not be over the age of 19**. All students **MUST** have a passing grade to compete in this event. Registration cards can be purchased during the early Equipment check.

ADMISSIONS: All lifters must be drug free for Thirty-six (36) months.
\$10.00 A DAY. \$20.00 WEEKEND PASS.
MAX OF TWO (2) COACHES PER TEAM ADMITTED FREE.

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

“QUALIFYING TOTALS ARE BASED ON THE CHANGES FROM THE 2008 NATIONAL MEETING. SEE AGENDA FOR TOTALS”

**FOR THE BEST IN POWERLIFTING GEAR CONTACT
TITAN SUPPORT SYSTEMS 361-991-6749**

ENTRY FORM

NAME: _____ AGE: _____ SEX: _____

ADDRESS: _____
STREET / CITY / STATE / ZIP

PHONE: (_____) _____ WEIGHT CLASS _____ DIVISION _____

USAPL# _____ TEAM: _____ BEST TOTAL: _____

SIGNATURE/SEAL OF SCHOOL REGISTRAR _____

ADVANCE SHIRTS (\$12.00 ea.) *specify quantity and sizes* _____

In consideration of my entry, I intending to be legally bound, hereby, for myself, my executors, and administrators, waive and release the USAPL, Killeen Civic and Conference Center and Visitors Bureau, the Meet Director, their agents, representatives, committees, and members from any and all claims or Rights to damage from injuries or losses suffered by me directly or indirectly competing in or attending the 2009 USAPL HIGH SCHOOL NATIONAL POWERLIFTING CHAMPIONSHIPS.

I agree to abide by the USAPL rules governing this event.

SIGNATURE: _____ DATE: _____

RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST
**IMPORTANT: READ THIS RELEASE CAREFULLY, WHEN YOU SIGN IT YOU WILL BE GIVING UP
IMPORTANT LEGAL RIGHTS.**

In consideration of the acceptance of my entry in this Powerlifting competition I intend to be legally bound, for not only myself but also for my heirs, my executors, and my administrators. I signing this release from liability I waive and release everyone connected with 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 physical tests which may be necessary to complete drug testing. Should I fail to pass the drug test 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 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 fee 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 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.

SIGNATURE IN FULL OF APPLICANT _____

Signature in full of parent or guardian if the applicant is under 21 years old

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 (36) months, nor have I used prescription diuretics or psychomotor stimulants during the seven days prior to this meet.

SIGNATURE IN FULL OF APPLICANT _____