



## APF/AAPF Show of Strength July 22, 2017



**ONLINE ENTRY FORMS AVAILABLE:**  
[destinationdallastexas.com/showofstrength](http://destinationdallastexas.com/showofstrength)

- MEET DIRECTOR:** destination team  
Gym@destinationdallastexas.com, 972.424.3539  
www.destinationdallastexas.com
- STATE CHAIRS:** Randy and Liz Nesuda (214) 517-9119; LNesuda@hotmail.com  
ApfTexas.wordpress.com
- SANCTIONED BY:** APF/AAPF/WPC
- EVENT LOCATION:** ...destination  
2655 Premier Drive  
Plano, Tx 75075
- ELIGIBILITY:** Lifters must be an APF registered athlete by the time of the meet. You can renew or get your new membership at weigh-ins or at [www.worldpowerliftingcongress.com](http://www.worldpowerliftingcongress.com).
- WEIGH-IN:** Friday, July 21, 2017: 9:00am – 1:00 p.m. and 4:00pm – 7:00pm  
...destination Dallas, Texas: 2655 Premier Drive Plano, Tx 75075  
Saturday, July 22, 2017: 7:00am – 8:00 a.m.  
Check in at Score Table.
- EVENT:** **MANDATORY RULES BRIEFING: Saturday July 22, 2017, at 8:00 a.m.**  
**Lifting starts Saturday, July 22, 2017, at 9:00 a.m.**
- UNIFORM:** One-piece lifting suit or wrestling suit is MANDATORY.
- CONTEST LIFTS:** Full Meet (Squat/Bench/Deadlift), Bench Only and Deadlift Only
- ENTRY FEE:** Meet entry fee is \$75 if received on or prior to the **DEADLINE, July 1, 2017**. If received after July 1, 2017, there's an additional \$25 late fee. Additional divisions are \$50 each. Certified checks, money orders and cash only, please. Make checks payable to **Gym and Fitness of Texas, LLC**.
- SPECTATOR FEE:** Everyone's WELCOME!

**destination APF/AAPF Show of Strength  
July 22, 2017**

**Please Print Legibly**

Full name: \_\_\_\_\_ Sex (circle one): Male Female  
Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ e-mail \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_  
Current APF card (circle one): No Yes If so, card number is \_\_\_\_\_

**APF or AAPF (circle one)**

<b>Event Entered</b> (circle all that apply):	Full Meet	Bench Only	Deadlift Only
<b>Raw/Equipped</b> (circle one):	Classic Raw	Raw	Equipped
<b>Division Entered</b> (circle all that apply):	Open		
	Teen:	13-15	16-17 18-19
	Junior:	20-23	
	Submaster:	33-39	
	Master:	40-44	45-49 50-54 55-59 60-64 65-69 70-74
		75-79	80+
<b>Weight Class</b> (circle one):	Women:	97 105 114 123 132 148 165 181 198 198+	
	Men:	114 123 132 148 165 181 198 220 242 275 308 308+	

**Fees & Payment:** Entry fee \$75: \_\_\_\_\_

**CASH, CERTIFIED CHECKS OR MONEY ORDERS ONLY, PLEASE** If after **July 1, 2017**, add late fee \$25: \_\_\_\_\_

Additional divisions \$50 each: \_\_\_\_\_

**Make checks or money orders out to:**

**Gym and Fitness of Texas, LLC.**

**TOTAL DUE:** \_\_\_\_\_

**ATHLETIC RELEASE:** On behalf of myself, my heirs, executors, administrators and assigns, I hereby waive, release and fully discharge any and all officials, sponsors, participants or organizations connected to the Texas APF, the WPC, Randy and Liz Nesuda, Greg McCoy, Tawna Eubanks, the APF/AAPF, destination dallas, texas, destination Gym and Fitness of Texas LLC, Gasp, Better Bodies, AM Fitness Inc, McCoy and Associates LP, Ultimate Sports Nutrition Plano, APF/AAPF Show of Strength, their respective officers, directors, employees, agents and shareholders, of and from any and all rights, claims, demands, lawsuits, and causes of action due to or arising from any accident, injury, damage or loss directly, indirectly, or in any way associated with my participation in the destination's APF/AAPF Show of Strength, July 22, 2017. I, also, represent that I know of no medical reason or condition that would impair my ability to participate in this event, and I hereby assume any and all risk of accidental, medical injury or consequential damages resulting from my participation. I acknowledge, understand and accept the inherent risk of powerlifting. I have read the above release, understand its meaning and consequence, and agree to be legally bound by its terms. I have signed this release freely and voluntarily.

Print Full Name \_\_\_\_\_

\_\_\_\_\_  
Lifter's signature  
(Parent must sign if Lifter is under 18 years of age)

**Return Entry Form to:**

**destination Dallas, Tx  
Attn: Greg McCoy  
400 Chisholm Place #418  
Plano, TX 75075**