



APF/AAPF Mississippi State Championship – October 25, 2025

MEET DIRECTOR and STATE CHAIRS: Deana Tollefson & Kyle Davis (apfmississippi@gmail.com)

SANCTIONED BY: APF/AAPF

EVENT LOCATION: Wyatt's Gym, 3520 Manor Drive, Vicksburg, MS, 39180. Meet will take place indoors, in the large building furthest back from the parking lot entryway (behind the main gym and behind the women's gym).

ELIGIBILITY: Lifters must be an APF/AAPF registered athlete by the time of the meet. You can renew or get your new membership at <https://worldpowerliftingcongress.com/#> No cards will be sold at weigh-ins; must purchase online.

WEIGH-IN: Friday, October 24, 2025: 9:00am – 11:00pm and 4:00pm – 6:00pm
Conducted at Wyatt's Gym, 3520 Manor Drive, Vicksburg, MS, 39180

EVENT: Saturday, October 25, 2025; MANDATORY RULES BRIEFING 8:00 AM; LIFTING STARTS 9:00 AM

UNIFORM: One-piece lifting suit or wrestling suit is MANDATORY.

CONTEST LIFTS: Full Meet (Squat/Bench/Deadlift), Bench Only, Deadlift Only.

EQUIPMENT:

- Squat: Texas Strength Systems monolift on platform using a 65lb Sportkraft squat bar/two TSS monolifts provided in warm up room and two 65lb squat bars provided in warm up room
- Bench: Texas Strength Systems bench on platform using a 55lb Sportkraft bench bar/two TSS benches provided in warm up room and two 55lb bench bars provided in warm up room
- Deadlift: 45lb Sportkraft deadlift bar will be used on platform/two 45lb deadlift bars will be provided in warm up room
- Kilo plates used on platform/kilo plates and iron plates will be provided in warm-up room

ENTRY FEE: Meet entry fee is \$80 (\$50 for high school students with ID). Each additional event is \$40. If received after **October 10, 2025**, there's an additional \$25 late fee. Please pay via PayPal @APFMississippi@gmail.com or cash in person.

SPECTATOR FEE: None

RULES: See [World Powerlifting Congress](https://worldpowerliftingcongress.com/#) for rulebook and records.

NOTES: No refunds. This meet will be capped at 35 lifters. Medals will be given to 1st place winners in each weight class/style. 4 best lifter awards will be given: Best male and female equipped full power (combines SP/MP), Best male and female non-equipped full power (combines raw/classic raw).

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ENTRY FORM- complete form and send via email to apfmississippi@gmail.com. Or register at mississippipowerlifting.bigcartel.com

Name: _____ Age: _____

Address: _____

Telephone: _____ E-mail: _____

APF/AAPF CARD# _____

APF or AAPF (circle one)	<u>Weight class</u> (circle one) Men's 114, 123, 132, 148, 165, 181, 198, 220, 242, 275, 308, and SHW Women's 97, 105, 114, 123, 132, 148, 165, 181, 198, 220, 242, and UNL	<u>Style</u> (circle all that apply) RAW (bare knees) CLASSIC RAW (sleeves/wraps) SINGLE PLY MULTI PLY UNLIMITED
<i>optional</i> Meet T-Shirts- \$25 (circle one:) S M L XL 2XL 3XL	<u>Division</u> (circle one) Open/Teen 13-15/Teen 16-17/Teen 18-19/Junior 20-23/Sub Master 33-39/Master 40-44/Master 45-49/ Master 50-54/Master 55-59/Master 60-64/ Master 65-69/Master 70-74/Master 75-79/ Master 80+	<u>Event</u> (circle all that apply) Full Meet Bench Only Deadlift Only

Total amount 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 Mississippi APF/AAPF, Kyle Davis, Deana Tollefson, Wyatt's Gym, Hardcore Barbell LLC. 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 APF/AAPF Mississippi State Championship, October 25, 2025. 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.

Signature in full _____ Date _____

Parent's signature (if under 18) _____

Return Entry Form to: apfmississippi@gmail.com you will receive an email confirmation. **Or register at the website listed above.**