# MHSPLA Regional Qualifier

**Hosted By: OXFORD HIGH SCHOOL** 

DATE: Saturday, January 13, 2024

PLACE: OXFORD MIDDLE SCHOOL, 1420 Lakeville Rd, Oxford MI 48371

REGISTRATION DEADLINE: These regions (Oakland and Macomb County School Districts) will pre-register on Tuesday, January 9, 2024 from 4pm to 7 pm. If there are spots available after Tuesday evening, an email will be sent out for others to pre-register on Wednesday, January 10, 2024 4pm to 7pm. An email will be sent out with confirmation late Tuesday after all emails are counted. Also, please be assured that teams who don't get in will have top priority to lift at schools closer to your area. Registration will close when 250 lifters in each division are reached.

## NO REGISTRATIONS WILL BE ACCEPTED EARLIER.

**ENTRY FEE:** \$20.00 CASH or MONEY ORDER

(NO personal checks will be accepted)

Lifters MUST PAY entry fee at the weigh-in site.

NO LATE REGISTRATION OR WALK-INS ALLOWED

#### **MEET DIRECTOR:**

Carol Carpenter – (248) 505-7886 – oxfordhspowerlifting@gmail.com

## **PLEASE NOTE:**

Athletes MUST weigh in wearing a t-shirt, shorts & socks. No shoes, jackets, sweatshirts, etc. will be allowed. This will be your official weight for the competition. Check scales are available. ONE attempt on the official scale only. Have your attempt card, wristband and student id with you for official weigh ins. NO EXCEPTIONS!

ALL LIFTERS MUST BE REGISTERED AND WEIGHED IN 60 MINUTES PRIOR TO THE SCHEDULED START OF LIFTING. PLEASE PLAN ACCORDINGLY.

#### **AWARDS**:

Top 3 medal in each weight class. Top 2 schools will receive a plaque.

#### **WEIGHT CLASSES:**

MEN: 114, 123, 132, 145, 155, 165, 181, 194, 207, 220, 242, 275, SHW WOMEN: 105, 114, 123, 132, 140, 148, 155, 165, 181, 198, 220, 242, 242+

#### **ROSTERS**:

Coaches/AD's should submit their roster of qualified lifters with their projected weight class. **PLEASE ATTACH SEPARATE ROSTERS FOR EACH GENDER.** Students MUST be enrolled in the school that they are competing with. This roster will be emailed to the meet director using the approved MHSPLA spreadsheet (no other format will be accepted) with the lifter's name, school, division, weight class (not actual weight – for 242+ type 243 and for 275+ type 276) and openers by the deadline stated on the registration form. Email spreadsheet listing all participating members to oxfordhspowerlifting@gmail.com.

Coaches: To ease check in and weigh in for the meet, teams should register together with the coach handing in all forms and money at the same time. Please do not register your lifters individually. Please have the coaches liability form completed and ready to turn in.

#### **MEET SCHEDULE:**

WOMEN'S MEET		MEN'S MEET	
6:45 AM	DOORS OPEN		
7:00-7:45 AM	REGISTRATION FOR FEMALE LIFTERS	11:15a-12:00PM	REGISTRATION FOR MALE LIFTERS
7:00-8:00 AM	WEIGH-INS FOR FEMALE LIFTERS	11:15a-12:15PM	WEIGH-INS FOR MALE LIFTERS
8:15-8:25 AM	LIFTER RULES MEETINGS (GYM)	12:30-12:40 PM	LIFTER RULES MEETING (Gym)
8:25-8:45 AM	LIFTER Warm-Up (Platform)	12:40-1:00 PM	LIFTER Warm-UP ( Platform)
8:45-8:55 AM	PLATFORM MEETINGS	1:00-1:10 PM	PLATFORM MEETINGS
8:55 AM	NATIONAL ANTHEM	1:10 PM	NATIONAL ANTHEM
9:00 AM	MEET STARTS	1:15 PM	MEET STARTS
Conclusion	AWARDS (Commons)	Conclusion	AWARDS (Gym)

#### WARM-UPS WILL BE TAKE PLACE ON THE PLATFORMS

**RULES**: MHSPLA rule will govern this meet.

#### **EQUIPMENT:**

This will be a RAW Meet. Shorts and Short Sleeve T-shirt (No sleeveless shirts allowed) No singlets or squat shorts or tights allowed.

MAXIMUM OF A 4-inch belt. Belt can be smaller. No padding in back or any type of Velcro straps allowed. Must be worn while squatting and deadlift. Compression shirts/shorts are acceptable. Only one layer for the upper body allowed. Long socks REQUIRED for deadlift.

**ADMISSIONS**: \$5.00 individual (Ages 10-59); Under 10/ Military/ 60+ FREE Oxford participates in GOFAN and presale tickets for admission will be available. A link to the site will be emailed out to all coaches of teams who get into this meet.

## **MHSPLA 2024 OXFORD REGIONAL**

# Entry Form \$20.00 per lifter registration

Name	High School:
Grade:	Estimated Weight Class: Gender:
Home Address:	
City:	State: Zip:
Phone Number: (	
Division: JV W	omen V Women JV Men V Men
Openers: Squat	Bench Deadlift
responsible for not only my release from liability, I wai which may arise from this of In addition to the foregoing Oxford Powerlifting, Oxfor connected with this contest	I specifically release the MHSPLA & its' board members, Oxford HS, d Community Schools, the meet director, the meet assistants and anyone regardless of his/her contribution.
Signature :	Date:
Payment must be in cash	or money order only. (No personal checks will be accepted.)
Please make money orde	s or school checks out to: Oxford Community Schools -Powerlifting

### RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST

In consideration of the acceptance of my entry in the Powerlifting competition I intend to be legally bound, for not only myself but also for my heirs, my executors, and my administrators. By 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 the 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 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	DATE:		
SIGNATURE IN FULL OF PARENT OR			
GUARDIAN	DATE:		

CICNIA TRUDE IN LETT I OF

# **COACHES RELEASE FROM LIABILITY**

This form is for all coaches that are listed when the rosters are sent into the host schools they may enter the designated lifting area. All coaches that are listed must sign this release from liability. All lifters need only to sign the entry form. This form **does not** provide free entry to any and all events.

NAME:			
PERSONAL ADDRESS:			
CITY:	STATE	ZIP	-
PHONE:			
SCHOOL AFFILIATION:			
In consideration of my presence at or part myself, my executors, and administrators, members, Oxford High School, Oxford Po Director, their agents, representatives, con Rights to damage from injuries or losses s attending the current MHSPLA Junior Va	waive and release the owerlifting, Oxford of mmittees, and members suffered by me direct	he MHSPLA & its' Community Schools ers from any and all	board s, the Meet l claims or
SIGNATURE IN FULL OF APPLICANT		DATE:	
In consideration of the acceptance of my process competition I intend to be legally bound, and my administrators. By signing this reconnected with competition from any and may arise from this competition.	for not only myself b lease from liability I	out also for my heirs waive and release e	s, my executors, everyone
SIGNATURE IN FULL OF APPLICANT		DATE:	·