

# MHSPLA

## Regional Qualifier – Women Only

Hosted By: Port Huron High School

**DATE:** Saturday, February 3, 2024

**PLACE:** Port Huron High School – 2215 Court Street, Port Huron, MI 48060

**REGISTRATION DEADLINE:** These regions (St Clair, Sanilac, Lapeer, Huron Counties) will pre-register on Tuesday, January 30, 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 31, 2024 4pm to 7pm. An email will be sent out with confirmation late Tuesday after all emails are counted. Registration will close when 200 lifters is reached.

**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 – ALL REGISTERED LIFTERS MUST BE PAID FOR AT THE TIME OF REGISTRATION.**

**\*\*Coaches must register their TEAM AS A GROUP AND PRESENT MONEY AND FORMS ALL TOGETHER. (Women at their registration time) IF A LIFTER SCRATCHES AFTER THE SPREADSHEET HAS BEEN TURNED IN ON WEDNESDAY, THE MONEY IS STILL OWED TO US. Example - If you have 20 women on the spreadsheet you turned in and only 18 show, you still owe 400 dollars to the host site.**

**MEET DIRECTOR:** **Melanie Tatti** **EMAIL:** [mtatti@phasd.us](mailto:mtatti@phasd.us)

**AWARDS:** Medals First through Third. Women's Varsity Division (9<sup>th</sup> thru 12<sup>th</sup> grade) and JV Division (7<sup>th</sup> thru 10<sup>th</sup> grade)

### **PLEASE NOTE:**

**HOME WEIGH-INS.** Coaches/AD's will weigh their athletes at home for a projected weight class. This projection will be sent to the regional sites in a spreadsheet with the Lifter Name, School, Division, Weight Class and Openers by the deadline stated on the registration form. Email the spreadsheet listing all participating members to **Melanie Tatti** at [mtatti@phasd.us](mailto:mtatti@phasd.us) using the team roster spreadsheet provided on our meet page on the MHSPLA website.

**PLEASE NOTE: No other format will be accepted – If sent in any other format the email will be returned and you will have to put your roster on the appropriate spreadsheet risking not being able to complete if the cap is reached.** Email must be received no later than 8:00PM Wednesday **January 31, 2024** or whenever **200 lifters** have been reached.

When the athlete registers at the meet, he/she will be weighed in, wearing a t-shirt and shorts. No shoes, jackets, sweatshirts, etc. will be allowed. This weight will be documented and used for the competition. There will be check scales available and ONE attempt on the official scale only. Your exact weight will determine your weight class. **NO EXCEPTIONS**

**ALL LIFTERS MUST BE REGISTERED AND WEIGHED IN 45 MINUTES PRIOR TO THE SCHEDULED START OF LIFTING. PLEASE PLAN ACCORDINGLY. All lifters must show school student ID the day of registration. Every lifter must be affiliated with a school.**

**TEAM AWARDS:** Top 2 teams in each division. JV Women, Varsity Women

**Doors open at 6:45AM**

**MEET TIMELINE**

**CHECK-IN BEGINS:** 7:00am

**CHECK-IN ENDS:** 8:15am

**COACHES MEETING:** 8:15am

**LIFTER MEETING:** 8:20am

**WARM-UP:** 8:35-8:55am

**NATIONAL ANTHEM** 8:55am

**LIFTING BEGINS:** 9:00am

**ELIGIBILITY:** Open to all 7<sup>th</sup>-12<sup>th</sup> grade lifters. Students MUST be enrolled in the school that they are lifting. All students MUST be eligible to compete according to their school's eligibility standards. ALL LIFTERS MUST BE DRUG FREE FOR A MINIMUM OF 36 MONTHS. All lifters must qualify at a MHSPLA qualifying meet in order to compete at the State Finals.

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

**WEIGHT CLASSES:**

WOMEN: 105, 114, 123, 132, 140, 148, 155, 165, 181, 198, 220, 242, 242+

**EQUIPMENT:**

This will be a RAW Meet.

Shorts and Short Sleeve T-shirt.

Must have footwear on.

No singlet or squat shorts allowed.

No tights

No hats, earbuds, headphones allowed on the lifting platforms when attempting a lift.

Max 4-inch belt (**required for squat and deadlift**). No padding in back or any type of Velcro straps allowed.

Compression shirts/shorts are acceptable.

Long socks to the knee REQUIRED for dead lift.

**ADMISSIONS:** \$5.00 individual (11-59 yrs)

\$ FREE for 10 yrs and under, military, 60+

Port Huron High School participates in GOFAN and presale tickets for admission will be available. The link to this meet is <https://gofan.co/event/1345672?schoolId=MI10058>



# PORT HURON HIGH SCHOOL

## Regional Qualifier - Entry Form

\$20.00 per lifter registration

Grade \_\_\_\_\_ Weight Class \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ High School \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Openers: \_\_\_\_\_ Squat \_\_\_\_\_ Bench \_\_\_\_\_ Dead Lift \_\_\_\_\_

Check Division Entered:

\_\_\_\_\_ JV \_\_\_\_\_ Varsity \_\_\_\_\_ JV \_\_\_\_\_ Varsity  
\_\_\_\_\_ Women \_\_\_\_\_ Women \_\_\_\_\_ Men \_\_\_\_\_ Men

In consideration of the acceptance of my entry form in this Power lifting competition, I intend to be legally responsible for not only myself, but also my heirs, my executors, and my administrators. In signing this release from liability, I waive and release everyone connected with competition from any and all liability, which may arise from this competition. In addition to the foregoing, I specifically release Port Huron High School, Port Huron Area School District, meet directors, meet assistants and anyone connected with this contest, regardless of his/her contribution.

Participant's Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

Parent Name Printed \_\_\_\_\_

Payment must be in **CASH** or **MONEY ORDER** ONLY. (No personal checks will be accepted.)  
Please make money orders out to **Port Huron High School ONLY**.

### **RELEASE FROM LIABILITY AND CONSENT TO DRUG TEST**

In consideration of the acceptance of my entry in the Power lifting 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 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: \_\_\_\_\_

# COACHES RELEASE FROM LIABILITY

This form is for all coaches that are listed when the rosters are sent in to 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: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_

In consideration of my presence at or participation in, I intending to be legally bound, hereby, for myself, my executors, and administrators, waive and release Port Huron High School, Port Huron Area School District, 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 participating in or attending the current MHSPLA Regional Meet.

SIGNATURE IN FULL OF  
APPLICANT \_\_\_\_\_ DATE: \_\_\_\_\_

In consideration of the acceptance of my presence at or participation in this Power Lifting competition I intend to be legally bound, for not only myself but also for my heirs, my executors, and my administrators. In 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.

SIGNATURE IN FULL OF  
APPLICANT \_\_\_\_\_ DATE: \_\_\_\_\_.