

**2009 BCPA Fall Classic**  
**Powerlifting and Bench Press Championships**

**Date:** Saturday, October 24, 2009  
**Location:** Roundhouse Community Arts & Recreation Centre  
181 Roundhouse Mews, Vancouver, BC

**Schedule:** Special Olympics Weigh In 9:00 am Lifting at 10:30 am  
Bench Only Weigh In 10:30 am Lifting at 12:30 pm  
Powerlifting Weigh In 12:00 pm Lifting at 2:00 pm  
(\*Times are subject to change based on registration numbers\*)

**Sanctioned By:** British Columbia Powerlifting Association (BCPA) and  
Canadian Powerlifting Union (CPU)

**Rules:** IPF Rules, drug testing to IPF Specification

**Eligibility:** Open to all current (2009) CPU members.

**Entry Fees:** Open, Master, Junior -  
\$55 Powerlifting \$75 Powerlifting and Bench Press  
Sub - Juniors -  
\$40 Powerlifting \$55 Powerlifting and Bench  
Special Olympics - \$40 Bench Press only - \$45 All Ages

**Make payment to:** **British Columbia Powerlifting Association**  
**(certified cheque or money order)**

**Send to:** #308 – 8675 French St, Vancouver, BC, V6P 4W5  
Phone (604) 734-2932 Email – olivejoe@shaw.ca

**Awards:** Medals 1, 2, 3 Place each weight class  
Best Lifters – Open/Masters, Junior/Sub-Junior, Bench Press,  
Special Olympics  
(min. 5 per age category)

**Entry Deadline: RECEIVED BY: October 12, 2009.**

**Please Note:**

**Entry Form** - late entries will not be accepted, so please send entry form early.  
No refunds after entry deadline.

**Weight Class** - medals are scripted with the weight class that you have entered; any  
changes to your weight class will be the responsibility of the lifter to have medal  
inscription changed.

**Coaching** - will be limited to 1 coach / lifter.

**Warm Up area** - only for lifters and coach; all lifters must ensure the use of collars when  
warming up.

**Drug Testing** - This is a drug-tested contest. Once a lifter has weighed in he/she  
accepts the IPF drug-testing procedure IN FULL, and from that moment on is in the  
contest. The lifter may not exit from the contest before its completion, EVEN IF HE/SHE  
BOMBS OUT! This may be viewed as a refusal to submit a sample for anti-doping  
control, and if so will result in immediate disqualification from the contest and suspension  
from the BCPA/CPU.

-----Keep the above page for contest details!-----

**SEND WITH ENTRY FEE TO: Joe Oliveira**  
#308 – 8675 French St, Vancouver, BC, V6P 4W5

**Name:** \_\_\_\_\_ **CPU Card #** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_

**Men's Weight Class - Circle one:**

52    56    60    67.5    75    82.5    90    100    110    125    125+

**Women's Weight Class - Circle one:**

44    48    52    56    60    67.5    75    82.5    90    90+

**Age Category - Circle one:**

Open                      Master                      Junior                      Sub-Junior

**Competition - Circle one:**

Powerlifting    Bench Press    - only    Powerlifting + Bench Press    Special Olympics

**Waiver:** I hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the B.C. Powerlifting Association, the Roundhouse Community Arts & Recreation Centre, the Vancouver Park Board, the City of Vancouver, the Province of B.C., and any of its employees, organizers, volunteers and sponsors of this competition, which may arise in consequence of my participation in this contest. I realize that Powerlifting is a high risk sport and that I could be injured. I certify that I am in good physical health and that I have no serious health problems and that I assume full responsibility for such conditions. I accept that I am fully responsible for my well being and safety in the warm up room, on the lifting platform and while I am competing at this event. I am also aware that I am responsible for the actions of any coach and entourage that attend this contest in my support. I also certify by my signature that I have read this waiver and fully understand and accept its terms. I do hereby verify my acceptance of these terms by my signature below.

**Signature:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian :** \_\_\_\_\_ ( if under 18 yrs. of age)