



# Kauffman/Stovall



## Junior & Open Weightlifting Meet

**Date:** Saturday, April 17th, 2010  
**Location:** Salvation Army, 1137 N. Santa Fe, Salina, KS 67401  
 [Candlewood Suites, 2650 Planet Ave., 785-823-6939 -- Queens Single \$65 –Double \$75—Must reserve by March 30th]  
 (Endiron Estate Bed and Breakfast, 100 S. College Ave., Salina, KS 67401-785-452-9300—\$55 to \$135)

**Meet Director:** Dennis Espinosa—785-342-0073

**Competition Secretary:** Bruce Wilson 785-643-3145

**Rules:** Current IWF and USAW rules will be followed.

**Eligibility:** USAW members only. You must show proper ID and USAW card at weigh in.

**YOU MUST BE A MEMBER BEFORE DAY OF MEET. NO DAY-OF-MEET REGISTRATION!**

**Awards:** Medals for top three (3) places in each Weight Class of ALL age divisions—male and female.

— One Best Lifter for each Male and Female Division —

**SCHEDULE:** Two lifting platforms will be used. THE SCHEDULE IS SUBJECT TO CHANGE.

Session	Category	Weigh-In	Lift
1	All Women	8:00 AM	10:00 AM
2	All Under 13 Boys & Boys 14-15 & 16	10:30 AM	12:30 AM
3	18—20 & Open Men	12:30 PM	2:30 PM

**Entry Fee:** \$15.00 for Each Participant [ Make checks payable to: Reps & Sets Team Salina]

**Deadline:** Entrée must be RECEIVED by Monday, April 12th, 2010.

NO LATE ENTRIES WILL BE ACCEPTED

Mail entry to: Bruce Wilson, 1333 N. Marymount Rd., New Cambria, KS 67470



Name: \_\_\_\_\_ Weight Class: \_\_\_\_\_ USAW#: \_\_\_\_\_

(Please Print)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Phone: \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_ Coach/Phone: \_\_\_\_\_ / \_\_\_\_\_ - \_\_\_\_\_

Club: \_\_\_\_\_ E-Mail: \_\_\_\_\_ @ \_\_\_\_\_

AGE Division: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ . Gender (Circle): M or F

In consideration of your accepting this entry, I hereby for myself, executors and administrators waive and release any and all rights and claims for damages I may have against the patrons of this meet., Reps and Sets Team Salina, Salina Salvation Army, USAW, MO Valley Weightlifting Committee for any and all injuries that may be suffered by me in connection with my competition in this meet.

\_\_\_\_\_  
Lifter's Signature

\_\_\_\_\_  
Parent Signature (if lifter is under 18)

\_\_\_\_\_  
Date