



Competitor Waiver and Release of Claims

Name of Meet
Dates and Location

I (or I on behalf of my child) on behalf of myself, my heirs, executors, administrators, and assigns, (or my child's heirs, executors, administrators and assigns), hereby irrevocably waive, release and fully discharge the International Powerlifting Association (IPA) and **YOUR COMPANY NAME** and **NAME OF VENUE** their respective officers, directors, employees, agents, and shareholders, of and from any and all rights, claims, demands, expenses, costs, lawsuits, and causes of action (including, but not limited to, consequential damages) due to or arising from any accident, injury, damage or loss directly, indirectly or in any way associated with my participation of myself (or any participating child of mine under the age of 21 years) in the Powerlifting competition held at **NAME OF VENUE** sponsored by **YOUR COMPANY NAME**.

I represent that I know of no medical reason or condition that would impair my ability (or my child's ability) to participate in this event, and I hereby assume any and all risk of accidental, medical injury or consequential damages resulting to me from my participation (or resulting to my child from his/her participation). I acknowledge, understand and accept the inherent risks of Powerlifting competition.

I fully understand that if I enter the Amateur (drug tested) division and achieve an Amateur status total, I may be randomly selected to submit to a urinalysis test for the presence of anabolic steroids. If I enter the Amateur division and achieve a Professional total, I agree to submit myself to a drug test by urinalysis for the presence of anabolic steroids 100% of the time. If this test is found positive for anabolic steroids I (the signed applicant) will pay for the cost of this test. If the test is found to be negative, the test will be paid for by the IPA. By signing this release from liability, I irrevocably waive all rights, claims, demands, lawsuits and causes of action against everyone connected with this contest with regard to the result of any drug test. **I have read the above release, understand its meaning and consequences, and intend to be legally bound by its terms and have signed this release freely and voluntarily. If signing on behalf of a child under the age of 21, I acknowledge that I as the legal guardian of such child and able to provide, on their behalf, the waivers and releases contained in this document.**

Signature (in full) of applicant Date

Print name of applicant

Signature (in full) of parent or guardian if applicant Date
is under 21 years of age.

Print name of applicant under 21 years of age