

WAIKANE CONGREGATIONAL CHURCH, 48-419 KAMEHAMEHA HWY, Kaneohe, Hawaii, 96744
PRESENTS: 2018 AAU HAWAII STATE CHAMPIONSHIP Weightlifting, Powerlifting, Bench, Deadlift and Push-Pull
Date: Jan 20 2018 lifting begins at 9 am

Name: _____ Phone: _____ A.A.U. # _____

Address _____ City _____ State _____ Zip _____

Weight Class _____ Age: _____ D.O.B. _____ Sex _____

E-Mail address _____

WEIGHTLIFTERS PLACE WL for weightlifting, SN for Snatch only, or CJ for Clean and Jerk only in appropriate block!

Open: _____ Teen: _____ Youth: _____ Junior: _____ Sub Master: _____

Master: _____ Law/Fire: _____ Military _____ Lifetime Masters _____

POWER LIFTERS PLACE "P" for Powerlifting, "B" for Bench, "D" for Deadlift, "C" For Push-pull in appropriate block!

Equipped

Open: _____ Teen _____ Youth _____

Junior: _____ Sub Master: _____ Master: _____ **Military/ Law/Fire:** _____

Lifetime _____ Lifetime Masters _____

Raw is Real

Raw Open: _____ Raw Teen: _____ Raw Youth: _____

RAW HIGH SCHOOL _____ Raw Junior: _____ Raw Sub Master: _____ Raw Master: _____

Raw Lifetime: _____ Raw Lifetime Masters _____

Raw **Military/ Law/Fire/Military:** _____ Disabled: _____ (specify, Dwarf, Blind, Wheel Chair) High School _____

AAU Powerlifting and Weightlifting Waiver and Consent

In order to be able to participate in this or any other AAU Weightlifting event, I hereby consent to be drug tested by urine analysis or whatever other method is chosen by the AAUPC. I agree if I fail or refuse to be tested that I will automatically be disqualified from the event(s) and may be subject to further penalties under the AAU Code. I further consent to the publication of my test results and/or my failure/refusal to test in sole discretion of the AAUPC.

I understand that both the collection process and testing procedures will be performed by a third party (not AAUPC or AAU)

I hereby release, discharge and covenant not to sue the AAUPC and/or the AAU, their respective administrators, directors, agents, officers, members, volunteers, employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of the premises on which any AAU activity takes place (each considered one of the releases) , from all liability, claims, demands, losses, or damages on any account caused or alleged to be caused in whole or in part by any and all of the releases or otherwise, relative to the drug testing, the publication(s), or any matter related to this event, and further agree that if, despite this release and waiver of liability, assumption of risk and indemnity agreement, such a claim is made against any of the releases, the undersigned will indemnify, save and hold harmless each of the releases from any litigation expenses, attorney's fees, loss, liability, damage, or cost which may occur as a result of such claim.

The parties agree that if any portion of the consent/release shall be deemed invalid and/or unenforceable, the rest of such consent/release shall remain in full effect.

Signature: _____ Date: _____

Signature of Parent or Guardian: _____ if under age 21

You can email app To: KENEKES@HAWAII.RR.COM If paying with card , or Postal mail Kenekes Grill at Punalu'u, 53-138 Kamehameha Hwy, Punalu'u Hawaii 96717