



2023 Dr. Billy Jack Talton Hall of Fame Meet Hosted by: West Monroe High School

DATE: January 7, 2023

MEET DIRECTOR: Jeremy Many

SITE: **West Monroe High School New Gym**
201 Riggs Street
West Monroe, LA 71291

DEADLINE: Entry's Forms must be e-mailed to me no later than
Tuesday, January 3rd, 2023
E-MAIL: many@opsb.net

ALL WAIVER AND ENTRY FORMS CAN BE DOWNLOADED OFF LHSPLA WEBSITE.

ENTRY FEE: **\$25.00 FOR EACH LIFTER** – Unlimited lifters per team.

MAKE ALL CHECKS PAYABLE TO: West Monroe High School

ELIGIBILITY: Schools will be allowed to bring as many lifters as they wish. Any lifter, who meets the eligibility requirements set forth by the LHSPLA in Article VIII of the constitution, are eligible to lift.

LIFTING SUITS AND SINGLETS ARE NOT REQUIRED.

WAIVERS: All lifters participating in the Billy Jack Talton Hall of Fame Meet must produce a signed waiver to be eligible to compete.

UNIFORM: The LHSPLA uniform rule, Section III, rule 1 a-d, will be waived for all lifters.

ADMISSION: Adults: \$7, (Children under school age get in free)

AWARDS: Trophies for 1st—3rd place finishers in each weight class.
Outstanding Lifter Plaques: light and heavy platform-girls and boys.

CONCESSION: **No outside food or drink allowed**



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Schedule of Events

TO EXPEDITE THE CHECKING IN PROCESS, THERE WILL BE NO WEIGH-IN HELD ON FRIDAY NIGHT OR SATURDAY MORNING. EACH TEAM WILL BE ALLOWED TO WEIGH THEIR KIDS IN AT THEIR SCHOOLS. EACH COACH WILL BE RESPONSIBLE FOR EITHER E-MAILING OR FAXING THEIR TEAMS BODY WEIGHTS AND OPENERS TO *E-MAIL* – many@opsb.net BY TUESDAY, January 3rd, SO THE BODYWEIGHT AND OPENER INFORMATION CAN BE PUT IN LIFTINGCAST.

MEET SCHEDULE (BOYS/GIRLS):

SATURDAY, January 7th, 2023

CHECK-IN6:30 – 8:00 A.M.
COACHES MEETING8:00 – 8:30 A.M.
OFFICIAL’S MEETING..... 8:00 – 8:30 A.M.
WARM-UP.....8:10 – 8:40 A.M.
REPORT TO PLATFORMS FOR RULES BRIEFING.....8:45 A.M.

LIFTING STARTS..... APPROXIMATELY 9:00 A.M.

ALL LIFTERS MUST SECURE SIGNATURE OF PARENT/GUARDIAN – FORM MUST BE COMPLETED USING AN INK PEN

LHSPLA/LHSAA Health Insurance Information Form 2022-2023

This form shall be turned into the Meet Director before participation in an LHSPLA/LHSAA sanctioned Invitational/Tri/Regional/State Meet will be allowed. Schools with group policies may submit a letter with their group policy information with a certified list of covered students. **The Meet Director has discretion to permit participation to accommodate unique circumstances regarding policy information.** I have read and understand the above information as it pertains to (lifter's name)

_____ Sex: M ___ F ___

participation in an LHSPLA/LHSAA sanctioned Invitational/Tri/Regional/State Meet for the 2022-2023 Powerlifting Season.

Address: _____

City: _____, LA Date of Birth: _____

Currently attends the ___th grade at _____ High School

Is covered by (check one): Regular/Indemnity ___ PPO ___ HMO ___ Point of Service ___

Medicaid ___ (Medicaid number ***must*** be listed on this form if that is the Insurance Provider of choice by the meet participant, form will be ***null and void*** without a correctly listed ***Medicaid Number.***)

Name of Insurance Company: _____

Name of Policyholder: _____

Policy Number: _____ Group Name or Number: _____

2022-2023 LHSPLA/LHSAA Invitational/Tri/Regional/State Meet Waiver

The undersigned, with full knowledge of the hazards and inherent risks of physical and mental injury involved in powerlifting competitions hereby release(s) all rights (known and unknown), claims, and interest for *any* injuries and/or damages against the LHSPLA, LHSAA, host schools, meet directors, officials, spotters, and loaders as a result of the named lifter participating in an LHSPLA/LHSAA sanctioned Invitational/Tri/Regional/State Meet during the 2022-2023 powerlifting season.

This waiver also releases the LHSPLA from any claims of liability (known or unknown) related to the results of a sanctioned LHSPLA/LHSAA Invitational/Tri/Regional/State Meet being published on its website. A student may be identified by first name and/or first initial of the last and the name of their school.

_____ Post my results on the LHSPLA/LHSAA website.

_____ Do not publish my results on the LHSPLA/LHSAA website

I have read and understand all of the information listed above.

Lifter's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Coach's Signature: _____ Date: _____

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