

PORT ALLEN
Girls only Invitational



January 28, 2023

PAHS

DATE: January 28, 2023
MEET DIRECTOR: Brian Bizette
Phone: (225) 788-2491
Email: Brian.Bizette@wbrschools.net
SITE: Port Allen High School (Gym)
3553 Rosedale road Port Allen La.70767

**DEADLINE: Entry's Forms emailed to me no later than
Friday, JANUARY 24, 2023
E-MAIL: Brian.Bizette@wbrschools.net**

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

ENTRY FEE: \$20.00 FOR EACH LIFTER – Unlimited lifters per team.

MAKE ALL CHECKS PAYABLE TO:PAHS Girls Powerlifting

ELIGIBILITY: Schools will be allowed to bring as many lifters as they wish. Any lifter, who meet 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 Port Allen Invitational 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: \$10..00 online payment (Go fan) and at the door credit or debit card.
Cash @ the door will be \$15.00.**

AWARDS: Medals for **1st—3rd place finishers** in each weight class.

Outstanding Lifter Awards: light and heavy platform-girls..

**2023 Port AllenInvitational
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 Brian.Bizette@wbrschools.net BY FRIDAY, JANUARY 23,2023 INFORMATION CAN BE PUT ON THE CARDS.

MEET SCHEDULE (BOYS/GIRLS):

SATURDAY, FEBRUARY 1, 2020

CHECK-IN	6:30 – 8:00 A.M.
COACHES MEETING	8:00 – 8:30 A.M.
OFFICIAL'S MEETING.....	8:00 – 8:30 A.M.
WARM-UP.....	8:25 – 8:45 A.M.
REPORT TO PLATFORMS FOR RULES BRIEFING.....	8:45 A.M.
OPENING CEREMONIES.....	9:00 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: _____

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