



## 2022 TIOGA INDIAN POWERLIFTING MEET

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DATE: December 17, 2022

MEET DIRECTOR: Alan Lacombe  
Phone: [\(318\) 640-9661](tel:3186409661) Cell [\(337\) 250-3114](tel:3372503114)  
Email: [alan.lacombe@rpsb.us](mailto:alan.lacombe@rpsb.us)

SITE: **Tioga High School**  
1207 Tioga Rd.  
Ball, LA 71405

DEADLINE: Entry's Forms e-mailed to me no later than  
**Monday, December 12<sup>th</sup> @3:00pm.**  
E-MAIL: [derek.toro@rpsb.us](mailto:derek.toro@rpsb.us)

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

ENTRY FEE: **\$20.00 FOR EACH LIFTER – THERE IS ALSO A \$100 NONREFUNDABLE DEPOSIT FOR ALL TEAMS TO RESERVE THEIR SPOT IN THE COMPETITION. DEPOSIT IS DUE BEFORE NOVEMBER 1, 2022.**

**MAKE ALL CHECKS PAYABLE TO: *Tioga High School***

ELIGIBILITY: Schools will be limited to **20 female lifters.** Any lifter, who meets the eligibility requirements set forth by the LHSPLA in Article VIII of the constitution, is eligible to lift.

**LIFTING SUITS AND SINGLETS ARE NOT REQUIRED.**

WAIVERS: All lifters participating in the THS 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: \$8.00 General Admission (Children 1<sup>st</sup> Grade and under get in free)

AWARDS: Medals for 1<sup>st</sup>—3<sup>rd</sup> place finishers in each weight class.  
Outstanding Lifter Trophies: light and heavy platform.  
Team awards will be presented to the 1<sup>st</sup> and 2<sup>nd</sup> place teams.

## 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 E- MAILING THEIR TEAMS BODY WEIGHTS AND OPENERS TO *E-MAIL – [derek.toro@rpsb.us](mailto:derek.toro@rpsb.us) BY Monday, December 12<sup>th</sup>*, SO THE BODYWEIGHT AND OPENER INFORMATION CAN BE PUT ON THE CARDS.**

## MEET SCHEDULE:

### SATURDAY, DECEMBER 17<sup>TH</sup>

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.....8:00A.M. – 8:45 A.M.  
REPORT TO PLATFORMS FOR RULES BRIEFING.....8:45 A.M.  
OPENING CERMONIES.....8:55 A.M.  
**LIFTING STARTS.....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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