

2023 Lion Invitational



Date January 14th, 2023

Meet Director John Burford

Phone: (985) 768-2916

Email: johnburford113@gmail.com

Site Covington High School

73030 Lion Dr

Covington, LA 70433

Deadline Spots must be confirmed by email no later than

Wednesday, January 4th, 2023 Email johnburford113@gmail.com

Please inform the meet director as soon as possible if you will not be needing all of your requested spots. At the Deadline, teams agree to pay for all confirmed spots before anyone from that team is allowed to

compete

Entry Fee \$25 per lifter - only 11 lifters per team

Make all checks payable to Covington High School

Eligibilty Any lifter who meets the eligibilty requirements set forth by the LHSPLA in

Article VIII of the constitution are eligible to lift.

All lifters must produce a signed waiver before competing.

Uniform The LHSPLA uniform rule, Section II, rule 1 a-d will be waived for all lifters

Admissions Adults......\$7

Students with ID...........\$4
Under 10......Free

Awards Medals for 1st - 3rd place in each weight class

Outstanding Lifter Awards: Light & Heavy platforms, boys and girls

1st and 2nd place teams, boys and girls



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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 e-mailing their teams bodyweights and openers to johnburford113@gmail.com by Friday, January 6th

Meet Schedule (Boys and Girls)

Saturday, January 14th 2023

Check-In	6:30 - 8:00 AM
Coaches Meeting	8:00 - 8:30 AM
Officials Meeting	8:00 - 8:30 AM
Warm-up	8:25 - 8:45 AM
Report to platforms	8:45 AM
Opening ceremonies	8:55 AM
Lifting starts	9:00 AM

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 <u>must</u> 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