

2023

Sacred Heart High School

Invitational Powerlifting Meet

"Home of the Trojans"

Date: Saturday January 14, 2023

Meet Director: Duane Urbina, Head Coach Phone (337) 831-0894
Email: Durbina@gmail.com

Site: Sacred Hear High School, 114 Trojan Lane, Ville Platte LA
Basketball Gym

Entry Fee: \$25.00 a lifter Make all checks payable to Sacred Heart High School

Eligibility: LHSAA/LHSPLA eligibility rules apply (Article VIII of the constitution)

Equipment: Lifters are allowed to lift in Official LHSPLA Equipment or shorts and t-shirts. Lifting singlets are not required.

Deadline: All Entry Forms must be e-mailed to Meet Director no later than Tuesday January 10, 2023.

Waiver Forms: Attached to this Meet Package a the end.

Admission: \$10.00 adults \$8.00 students, children under 5 free

Canteen: Opens at 8:00 am

Awards: Medals for 1st – 3rd in each weight class for boys and girls. Outstanding lifter awards will be given for light and heavy platforms for boys and girls. 1st and 2nd Team awards.

Platforms: 2-3 platforms

Weight Classes: Girls – 97, 105, 114, 123, 132, 148, 165, 181, 198, 220, SHW
Boys – 114, 123, 132, 148, 165, 181, 198, 220, 242, 275, SHW

Official Weigh-In: This will be done at each individual school competing and emailed to the Meet Director by Tuesday January 10, 2023 with opening attempts.

Hospitality Room for coaches and officials will be provided.

First Attempts: Openers will be sent in with the weigh-ins on Tuesday January 10th.

Schedule of Event: Check – In7:00 – 8:00
Coaches Meeting..... 8:00 – 8:30
Officials Meeting.....8:15 - 8:30
Warm – Up8:15 - 8:45
Lifters Report to platforms.....8:45
Opening Ceremonies.....9:00
Lifting Starts immediately after Opening Ceremonies

Hospitality Room for coaches and officials will be provided.



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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