





## "STRONG ENOUGH TO CARE"

# Charity Strongman Meet! "DECEMBER, 2018"

Venue: El Jefe CrossFit 8110 W Union Hills Dr #250 Glendale, AZ 85308

Date: Saturday, December 1st, 2018

Time: Saturday, doors will open at 8 am, Rules brief at 9 am, competition starts at 10am

Weigh-in: Friday Night, November 30th 7pm-8:00 pm & Saturday 8am - 9:00 am @ El Jefe Crossfit

Technical Meeting: 9:00 am Saturday; Competition Starts at 10:00am.

This event is licensed by the Amateur Athletic Union of the US, Inc.

DRUG TESTING: All athletes entered may be subject to drug testing per AAU policies and procedures.

This meet will be sanctioned for American records

Membership: AAU MEMBERSHIP IS REQUIRED. All cards must be purchased online prior to the event.

AAU membership is not included as part of the entry fee to the event. Participants are encouraged to visit "www.aausports.org" to obtain membership. Youth membership is \$16 and adult membership is \$24

For those who don't have a current AAU Card, get your card after August 15 each year to take advantage of the new card year.

Proceeds to benefit the Local Toys for Tots!

Please Make all checks Payable to: Mikel Meadows 1811 Tejon Dr Bullhead City, Arizona 86442







Meet Director: Mikel Meadows (928) 234-5774 seekprov31@gmail.com

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Entry Fee: To guarantee meet T-shirts, fees need to be paid by Nov 16th, 2018!

Please indicate amount of check enclosed: Strongman\_\_\_ # of T-shirts\_\_\_ Sizes: S\_\_ M\_\_ L\_\_ XL\_\_ XXL\_\_

\$45 for Event \$20 per t-shirt Total Amount enclosed\_\_\_\_\_

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### MOHAVE MUSCLE



**POWERLIFTING & STRONGMAN** 







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*"DECEMBER*, 2018"

Address		City	State	Zip	
Age:	D.O.B	Sex			
E-Mail address	·				
Weight Class_	Tee	n Open	Masters		
Strongman \$45	5 for Adults \$30 for St	tudents (19&under)			
hereby consented to be termined the AAU discretion of the third party (now respective admitted to be caused in publication (so, assumption of indemnify, savus damage, or constant of the deemented to be caused in publication (so, assumption of indemnify, savus damage, or constant of the deemented to be caused in the deemented to be deement	t to be drug tested by sted that I will autom I Code. I further consense AAUPC. I understant AAUPC or AAU) I he ministrators, directors and if applicable, owner of the releases), from whole or in part by a property or any matter relaterisk and indemnity age and hold harmless of the which may occur as and invalid and/or une	y urine analysis or what attically be disqualified ent to the publication and that both the collect reby release, discharge, agents, officers, menters and lessors of the point all liability, claims, any and all of the released to this event, and further than the greement, such a claim each of the releases from a result of such claim inforceable, the rest of	atever other method from the event(s) of my test results a ction process and to e and covenant nombers, volunteers, or emises on which a demands, losses, or otherwise, or ther agree that if, is made against a om any litigation end. The parties agree such consent/rele	nis or any other AAU Verd is chosen by the AAU and may be subject to and/or my failure/refusesting procedures will to sue the AAUPC and employees, other partially AAU activity takes or damages on any accordiative to the drug test despite this release army of the releases, the expenses, attorneys feet that if any portion of ase shall remain in full	UPC. I agree if I fail or of further penalties sal to test in sole be performed by a d/or the AAU, their icipants, any sponsors place (each ount caused or alleged sting, the addressigned will es, loss, liability, the consent/release I effect.
Signature:			Date	:	
Signature of pa	arent or Guardian:		if un	der age 21	







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AMATEUR ATHLETIC UNION	STRENGTH SPORT	TS DRUG-TESTING CONSENT F	ROM	
drug-testing program and ha competition is prohibited and events. I understand and agr	ve read the Adult So d a violation of the A ee that the collectio cy. I acknowledge the	ubstance Abuse Program Summ AAU Code. I consent and agree t on process and testing procedur	nary. I acknowled to urine drug test es will be perforn	ease Print Name) Amateur Athletic Union Strength Sport ge that doping or the use of drugs before or during ing to participate in any and all AAU Strength Sports ned by a third party and in accordance with the AAU sults of the test by certified mail, return receipt
AAU Strength Sports SHALL acknowledge that if I test pos Sports events and may be su may request a hearing before that this Consent shall be in invalid and/or unenforceable	HAVE THE RIGHT 1 sitive, refuse to be to b	TO POST MY NAME ON THE SUS ested, and/or fail to appear for to laties and/or sanctions under the loard to challenge my disqualifical ar from the date of signing. The as and provisions of said Conse	SPENSION LIST Lesting, I will autor ee policies and pr action from any ar parties herein ag nt shall remain in	URNED FOR ANY REASON TO AAU Strength Sports, LOCATED ON THE WEB PAGE OF AAU Strength Sports. matically be disqualified from any and all AAU Strength ocedures set forth in the AAU Code. I acknowledge that and all AAU Strength Sports. I acknowledge and agree ree that if any part of this Consent shall be deemed a full force and effect. I acknowledge that I have read this cted to be tested, I may be required to sign another
NAME:		DATE:		_
SIGNATURE		DATE OF BIRTH		
ADDRESS				
City	_ State	Zip Code	Country	

RENEWAL NEW MEMBER

AAU:

https://find.aausports.org/

MEMBERSHIP NUMBER\_\_\_\_\_\_\_
WITNESS (PRINT NAME): \_\_\_\_\_
SIGNATURE OF WITNESS: \_\_\_\_

https://www.facebook.com/groups/2084937838443469/

TELEPHONE NUMBER\_\_\_\_\_E-MAIL ADDRESS\_\_\_

#### **Mohave Muscle:**

https://www.facebook.com/groups/241035416542894/

https://www.facebook.com/mohavemuscle

Email: Mohavemuscle@gmail.com

FEMALE	AMBULANCE 15M/60SEC	DEADLIFT For REPS/60SEC	MYSTERY EVENT	KEG CARRY 50M/60SEC	MAS WRESTLING
LWTW LWMW		225#		100#	
MWTW MWMW		245#		120#	
HWTW HWMW LWOW		265#		120#	
MWOW		285#		140#	
нwоw		305#		140#	

MALE	FIRE TRUCK PULL 15M/60SEC	DEADLIFT For REPS/60SEC	MYSTERY EVENT	KEG CARRY 50M/60SEC	MAS WRESTLING
LWTM LWMM		305#		160#	
MWTM MWMM		345#		160#	
HWTM HWMM LWOM		385#		180#	
мwом		425#		180#	
нwом		465#		210#	

#### **EVENT DESCRIPTIONS:**

**Event 1: Vehicle Pull:** 

Athletes will have 60 sec to attempt to pull vehicle 15m with rope and harness!

(If we cannot arrange an ambulance or small firetruck, a 2010 GMC 2500 will be used!)

**Event 2: Deadlift for Reps:** 

Athletes will have 60 sec to complete as many reps as possible. Up & Down commands will be used!

(Bouncing will not be allowed!)

**Event 3: Mystery Event:** 

(Event will concentrate on over/head and shoulders!)

**Event 4: Keg Carry:** 

Athletes will have 60 sec to carry Keg 50m with a turn at 25 meters.

**Event 5: MAS Wrestling:** 

**Event will be run in Single, Double or Round Robin Tournaments.** 

(We reserve the right to adjust based on the number of athletes in each weight class!)

#### **EQUIPMENT RULES!**

#### Required:

Shoes or DL Slippers MUST be worn in Deadlift!

Knee High Socks MUST be worn for Deadlift!

#### Allowed:

Belt, Knee Sleeves, Knee Wraps, Elbow Sleeves, Wrist Wraps, Chalk, Talc Powder!

Gloves for TRUCK PULL & KEG CARRY only!

#### **Not Allowed:**

Straps, Tacky and or Lifting Suits of any kind!

Please check out the following links for rules!

http://image.aausports.org/handbooks/wrestling/Wrestling Handbook.pdf

http://maswrestlingusa.com/wp/wp-content/uploads/2013/09/International-Rules-MAS-Wrestling-USA-modifiedv0901213.pdf