

# 2020 AAU Tulsa Christmas Open Power Lifting, Push/Pull, Bench Press, Deadlift Championships Flyer



Power Lifting, Push/Pull, Bench Press, Dead Lift  
Date: Saturday December 6th 2020  
Sponsored by Kid Strength, Inc.

- \* Location: 7709 E. 42nd Pl. Tulsa Okla., 74145 #137. 2 blocks west of 42nd and Memorial
- \* Weigh in and equipment check: (Sat-Dec. 5th, 6:00 pm to 7:30 pm) & (Sun-Dec 6th, 8:00am to 9:00am)
- \* Meet Director: Dennis Brooks (dennisbrooks63@msn.com)
- \* Lifting begins at 10:00am; Sunday December 6th (rules meeting 9:30am)
- \* Men's weight classes: 66 77 88 97 105 114 123 132 148 165 181 198 220 242 275 308 308+
- \* Women's weight classes: 66 77 88 97 105 114 123 132 148 165 181 198 220 220+
- \* Age Divisions: (Youth6-7/8-9/10-11) (Teen 12-13/14-15/16-17/18-19) (juniors 20-23) (Open) (Sub Masters/Masters)
- \* **TUBE SOCKS ARE MANDATORY FOR DEAD LIFT.**
- \* Raw Division: Leather Belt (buckle or lever only), wrist wraps; single ply neoprene knee sleeves with no method of tightening and may not exceed 30cm. in length or ¼ inch thick. Raw adult lifters must use a singlet. Raw youth and teenage lifters can use a T-shirt and non-baggy shorts above the knee. Knee sleeves cannot touch socks, shorts or singlet. **NO KNEE WRAPS IN RAW DIVISION!!!**
- \* Equipped Division: Single ply squat suit, dead lift suit and bench press shirt. Knee wraps: 181 lbs. down, 2 meter length, 198lbs and above can use 2.5 meter wraps. Wrist wraps: cannot exceed 1 meter in length and 8 cm. in width. Knee wraps cannot touch squat suit or socks. More information, go to [www.austrengthsports.org](http://www.austrengthsports.org) and click on rules.
- \* Weights used will be in pounds.
- \* **Entry Fee: \$65.00/crossover \$35.00/NO REFUNDS!!!**(Powerlifting: squat, bench press, and dead lift). (Push/pull: bench press/deadlift). (Bench press only). (Deadlift only).
- \* Deadline: Entries postmarked after Dec.3rd, must pay a \$20.00 late fee. **Day of meet, cash only.**
- \* Spectator Admission: \$6.00 for adults---\$4.00 for students
- \* Send Entries and payment (check or money order) and drug waiver to: Dennis Brooks, 11526 S. Nandina Ave., Jenks Okla. 74037. **Drug test waivers only required for lifters Over 19 yrs. of age.** Contact me and I will e-mail you a form.
- \* Awards: 1st-3rd place in each division and each weight class.
- \* Outstanding Lifter/Squat/Bench Press/Dead Lift: Middle School, High School, Jrs, Open, Masters, Men's and Women's Divisions. **Must have at least 5 lifters each division for outstanding lifter awards, otherwise combined.**
- \* Questions: Contact Dennis Brooks at (918) 695-6439 or [dennisbrooks63@msn.com](mailto:dennisbrooks63@msn.com)
- \* State records: Facebook/Oklahoma AAU Power Lifting
- \* National records: [www.austrengthsports.org](http://www.austrengthsports.org) click on records & follow prompts.
- \* Rules video can be viewed on Facebook/Oklahoma AAU Power Lifting
- \* This event is licensed by the Amateur Athletic Union of the U.S. Inc.
- \* **All participants must have a current AAU membership.**
- \* AAU membership may not be included as part of the entry fee to the event.
- \* AAU memberships must be obtained before the meet begins
- \* Be Prepared: Adult and Non Athlete memberships are no longer instant and cannot be applied for at the event. \*Please allow 10 days for membership to be processed.
- \* Participants are encouraged to visit the AAU website [www.ausports.org](http://www.ausports.org) to obtain their membership

2020 AAU Tulsa Christmas Open Power Lifting,  
Push/Pull, Bench Press, Deadlift  
Championships  
Sponsored by KID STRENGTH  
Entry Form



Please Print:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age day of Meet: \_\_\_\_\_ Wt.: \_\_\_\_\_

Wt. Class \_\_\_\_\_ Division (ex: teens/jrs/open/masters) \_\_\_\_\_

AAU Card # :( mandatory) \_\_\_\_\_ Sex: **M** **F** (Circle one)

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**Circle Event Entered: (Power Lifting: Squat, Bench Press, and Dead Lift) (Push/Pull: Bench Press/Dead Lift) (Single Lift Bench Press) (Single Lift Dead Lift)**

**Circle Lift Type: (Equipped) (Raw)**

**Entry Fee: \$65.00/Crossover: \$35.00 NO REFUNDS**

Entries postmarked after Thursday 12/03/2020 must pay a \$20.00 late fee. Cash only day of meet. No Refunds!!

Make Checks or Money Order payable to: Dennis Brooks

Mail Entries to: Dennis Brooks, 11526 S. Nandina Ave, Jenks Okla. 74037

Please send Drug Test waivers with entry form for lifters above the age of 19. (Waivers can be obtained by contacting me).

Personal Best: Squat \_\_\_\_\_ Bench \_\_\_\_\_ Dead Lift \_\_\_\_\_ Total \_\_\_\_\_

I understand and will abide by all AAU Power Lifting rules and regulations waive and release the AAU, the promoter and all parties involved with the meet from any legal action that may be taken as a result of participation in the event. I realize Power Lifting competitions are potentially dangerous and physically demanding and I do so at my own risk.

SIGNATURE OF ATHLETE: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN IF UNDER 18 YRS OLD: \_\_\_\_\_

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\* All participants must have a current AAU membership.

\* AAU memberships may not be included as part of the entry fee to the event.

\* AAU memberships must be obtained before the competition begins BE PREPARED: Adult and Non Athlete memberships are no longer instant and cannot be applied for at the event. Please allow up to 10 days for memberships to be processed\* Participants are encouraged to visit AAU web site [www.aausports.org](http://www.aausports.org) to obtain their membership.

# AMATEUR ATHLETIC UNION POWER LIFTING DRUG TESTING CONSENT FORM

By signing this form, I affirm that I am aware of the Amateur Athletic Union Powerlifting (AAUPC) drug testing program and have Read the Adult Substance Abuse Program Summary.

I acknowledge that doping or the use of drugs before or during competition is prohibited and a violation of the AAU Code.

I consent and agree to urine drug testing to participate in any and all AAUPC events.

I understand and agree that the collection process and testing procedures will be performed by a third party and in accordance with the AAU Powerlifting Policy.

I acknowledge that AAUPC shall notify me of the results of the test by certified mail, return receipt requested, to the address I provide below. I FURTHER ACKNOWLEDGE AND AGREE THAT SHOULD NOTICE OF A POSITIVE TEST BE RETURNED FOR ANY REASON TO AAUPC, THE AAUPC SHALL HAVE THE RIGHT TO POST MY NAME ON THE SUSPENSION LIST LOCATED ON THE WEB PAGE OF AAU POWERLIFTING.

I acknowledge that if I test positive, refuse to be tested, and/or fail to appear for testing, I will automatically be disqualified from any and all AAUPC events and may be subject to further penalties and/or sanctions under the policies and procedures set forth in the AAU Code.

I acknowledge that I may request a hearing before the AAU Review Board to challenge my disqualification from any and all AAUPC events.

I acknowledge and agree that this Consent shall be in effect for one (1) year from the date of signing. The parties herein agree that if any part of this Consent shall be deemed invalid and/or unenforceable, the remaining terms and provisions of said Consent shall remain in full force and effect.

I acknowledge that I have read this Consent and fully understand and agree with its contents. I further acknowledge that if I am selected to be tested, I may be required to sign another Consent Form.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

ATHLETE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

MEMBERSHIP NUMBER \_\_\_\_\_ RENEWAL \_\_\_\_\_ NEW MEMBER \_\_\_\_\_

WITNESS (PRINT NAME) \_\_\_\_\_

SIGNATURE OF ATHLETE \_\_\_\_\_